

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2012 OCT 25 AM 11:54

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

CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

ADDRESS (number and street)

409 N. SUFFOLD AVE.

Check if different than previously reported. (ACC)

VENTNOR NJ 08406

2. FEC IDENTIFICATION NUMBER

C00522920

3. IS THIS REPORT NEW OR AMENDED CITY STATE ZIP CODE STATE DISTRICT

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 11 06 2012 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 10 01 2012 through 10 17 2012

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 CHARLES LUKENS

Signature of Treasurer Date 10 22 2012

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)

12030932263

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

Report Covering the Period:

From:

10 / 01 / 2012

To:

10 / 17 / 2012

	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))	, 200.00	, 450.00
(b) Total Contribution Refunds (from Line 20(d))	, --	, --
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, 200.00	, 450.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	, 1,764.00	, 3,125.22
(b) Total Offsets to Operating Expenditures (from Line 14)	, --	, --
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, 1,764.00	, 3,125.22
8. Cash on Hand at Close of Reporting Period (from Line 27)	, 50.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, --	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, 1,364.00	

For further information contact:

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

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

12030932264

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

Report Covering the Period: From: ^{M M ' D D ' Y Y Y Y} 10 ' 01 ' 2012 To: ^{M M ' D D ' Y Y Y Y} 10 ' 17 ' 2012

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).....	, 200.00	, 450.00
(ii) Unitemized.....	, ---	, ---
(iii) TOTAL of contributions from individuals ▶	, 200.00	, 450.00
(b) Political Party Committees.....	, ---	, ---
(c) Other Political Committees (such as PACs).....	, ---	, ---
(d) The Candidate.....	, ---	, ---
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	, 200.00	, 450.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

	, ---	, ---
--	-------	-------

13. LOANS:

(a) Made or Guaranteed by the Candidate.....	, 1,364.00	, 2,725.22
(b) All Other Loans.....	, .	, .
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	, 1,364.00	, 2,725.22

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

	, ---	, ---
--	-------	-------

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

	, ---	, ---
--	-------	-------

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

	, 1,564.00	, 3,175.22
--	------------	------------

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1,784.00	3,125.22
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	--	--
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	--	--
(b) Of All Other Loans.....	--	--
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	--	--
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	--	--
(b) Political Party Committees.....	--	--
(c) Other Political Committees (such as PACs).....	--	--
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	--	--
21. OTHER DISBURSEMENTS.....	--	--
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1,784.00	3,125.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	250.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1,564.00
25. SUBTOTAL (add Line 23 and Line 24).....	1,814.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1,769.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	50.00

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**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		OF	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>	<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)
CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. **EVELYN ENRIQUEZ**
Mailing Address
222 E. 80th STREET, APT 2-C
City State Zip Code
New York City N.Y. 10075

Date of Receipt

10 / 14 / 2012

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

, 200.00

Name of Employer

RETIRED PHYSICIAN

Occupation

PHYSICIAN

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

, 200.00

Full Name (Last, First, Middle Initial)

B. Mailing Address
City State Zip Code

Date of Receipt

M M / D D / Y Y Y Y

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

Full Name (Last, First, Middle Initial)

C. Mailing Address
City State Zip Code

Date of Receipt

M M / D D / Y Y Y Y

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify)

Election Cycle-to-Date

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

, 200.00

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

, 200.00

12030932267

**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	OF
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input checked="" type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) A. LUKENS, CHARLES		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 409 N. SUFFOLK AVE.		Amount of Each Receipt this Period , 1,364.00
City VENTNOR	State Zip Code N.J. 08406	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , 2,725.22
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period , , .
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	, , .
TOTAL This Period (last page this line number only).....	, 1,364.00

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**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 OF	
	<input 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)
CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) THE DAILY JOURNAL		Date of Disbursement MM / DD / YYYY 10 / 17 / 2012
Mailing Address 891 E. OAK RD.		Amount of Each Disbursement this Period 264.00
City VINELAND	State Zip Code NJ. 08360	
Purpose of Disbursement PRINT ADVERTIZEMENT	Category/Type 004	
Candidate Name CHARLES LUKENS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Full Name (Last, First, Middle Initial)	

Full Name (Last, First, Middle Initial) QUINN BROADCASTING INC		Date of Disbursement MM / DD / YYYY 10 / 17 / 2012
Mailing Address 415 N. HIGH STREET		Amount of Each Disbursement this Period 540.00
City MILLVILLE	State Zip Code N.J. 08332	
Purpose of Disbursement RADIO ADVERTIZEMENT	Category/Type 004	
Candidate Name CHARLES LUKENS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Full Name (Last, First, Middle Initial)	

Full Name (Last, First, Middle Initial) WIBG, LLC.		Date of Disbursement MM / DD / YYYY 10 / 17 / 2012
Mailing Address 3328 SIMPSON AVE.		Amount of Each Disbursement this Period 480.00
City OCEAN CITY	State Zip Code N.J. 08226	
Purpose of Disbursement RADIO ADVERTIZEMENT	Category/Type 004	
Candidate Name CHARLES LUKENS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Full Name (Last, First, Middle Initial)	

SUBTOTAL of Disbursements This Page (optional).....	1,284.00
TOTAL This Period (last page this line number only).....	

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**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 OF

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)

A. EQUITY COMMUNICATIONS, L.P.
Mailing Address
BAYPORT #100, 8025 BLACK HORSE PIKE
City State Zip Code
WEST ATLANTIC CITY N.J. 08232
Purpose of Disbursement
RADIO ADVERTIZMENT
Candidate Name
CHARLES LUKENS
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 17 / 2012

Amount of Each Disbursement this Period

480.00

004

Category/
Type

B.
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

480.00

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

1,764.00

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SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
CHARLES LUKENS FOR CONGRESS CAMPAIGN COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial) LUKENS, CHARLES		Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 409 N. SUFFOLK AVE.		
City VENTNOR	State N.J.	ZIP Code 08406
Original Amount of Loan 1,364.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1,364.00

TERMS Date Incurred 10 / 17 / 2012	Date Due 12 / 31 / 2012	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------------------	--------------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial) LUKENS, CHARLES	Name of Employer N/A
Mailing Address 409 N. SUFFOLK AVE.	Occupation RETIRED
City VENTNOR	State N.J.
ZIP Code 08406	Amount Guaranteed Outstanding: 1,364.00
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:

12030932271

SUBTOTALS This Period This Page (optional) ▶	
TOTALS This Period (last page in this line only) ▶	1,364.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
10/22/11

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JmW
PREPARER

10/25/11
DATE PREPARED

1203093272