



A. Form/Schedule : **F3XA**

Transaction ID :

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications such as ads are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		455323.41
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	478952.35									
(c) Total Receipts (from Line 19) .....	32445.90	434550.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	511398.25	889874.17								
7. Total Disbursements (from Line 31) .....	41682.44	420158.36								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	469715.81	469715.81								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	30483.00	346782.41
(ii) Unitemized .....	0.00	52496.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	30483.00	399278.41
(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) .....	30483.00	399278.41
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	2549.23
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	1860.00	27060.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	102.90	5663.12
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)) .....	32445.90	434550.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32445.90	434550.76

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	12.30
(b) Other Federal Operating Expenditures.....	9881.44	165809.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9881.44	165822.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31801.00	247551.00
24. Independent Expenditure (use Schedule E) .....	0.00	2000.00
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 .....	0.00	2185.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2185.10
29. Other Disbursements.....	0.00	2600.00
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))..	41682.44	420158.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41682.44	420146.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	30483.00	399278.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2185.10
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30483.00	397093.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9881.44	165809.96
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	2549.23
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9881.44	163260.73

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 30  
(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)  
Alan Berger

Mailing Address 24 Sutton Pl.

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 ▼ 1975.00

Date of Receipt 08 / 11 / 2009

**Transaction ID:** SA11AI.25533

Amount of Each Receipt this Period 1000.00

earmark-david vitter

**B.**

Full Name (Last, First, Middle Initial)  
Marc Berger

Mailing Address 210 W. 89th St.

City New York State NY Zip Code 10024

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 ▼ 2725.00

Date of Receipt 08 / 11 / 2009

**Transaction ID:** SA11AI.25543

Amount of Each Receipt this Period 2000.00

earmark-david vitter

**C.**

Full Name (Last, First, Middle Initial)  
Iris Berman

Mailing Address 225 Adams St

City Brooklyn State NY Zip Code 11201

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation n/a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt 08 / 11 / 2009

**Transaction ID:** SA11AI.25534

Amount of Each Receipt this Period 15.00

earmark-david vitter

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3015.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Bortniker		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
	Mailing Address 4 Kinzel Lane		Transaction ID: SA11AI.25516
	City West Orange	State NJ	Zip Code 07052
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer Self	Occupation Physician	membership

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00
---	------------------------------------

<b>B.</b>	Full Name (Last, First, Middle Initial) Ben Chouake		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
	Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11AI.25536
	City Englewood	State NJ	Zip Code 07631
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation MD	earmark-david vitter

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6050.00
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<b>C.</b>	Full Name (Last, First, Middle Initial) Esther Chouake		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
	Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11AI.25530
	City Englewood	State NJ	Zip Code 07631
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Self	Occupation MD	In-kind -

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 30  
(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) Mrs. colten		Date of Receipt MM / DD / YYYY 08 / 15 / 2009
Mailing Address 41 Fairway Ave		<b>Transaction ID:</b> SA11AI.25521
City West ORange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer n/a	Occupation n/a	membership
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

**B.**

Full Name (Last, First, Middle Initial) Reuven Escott		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
Mailing Address 55 Regent St.		<b>Transaction ID:</b> SA11AI.25585
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Securities Trader	earmark-corzine
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3125.00	

**C.**

Full Name (Last, First, Middle Initial) Dan Feder		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
Mailing Address 44 West 62nd St.		<b>Transaction ID:</b> SA11AI.25537
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Acker & Li	Occupation Businessman	earmark-david vitter
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 30

(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)  
Mort Fridman

Mailing Address 826 Winthrop Rd

City State Zip Code  
Teaneck NJ 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 ▼ 6875.00

Date of Receipt

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

Transaction ID: SA11AI.25586

Amount of Each Receipt this Period

500.00

earmark-corzine

**B.**

Full Name (Last, First, Middle Initial)  
Menachem Genack

Mailing Address 129 Meadowbrook Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Union of Orthodox Jewish Cong. Occupation Rabbinic Administrator

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 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.25587

Amount of Each Receipt this Period

500.00

earmark-corzine

**C.**

Full Name (Last, First, Middle Initial)  
Ann Goldfischer

Mailing Address 37 Cunningham Dr.

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Self Occupation Business

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 8 / 2 0 / 2 0 0 9

Transaction ID: SA11AI.25527

Amount of Each Receipt this Period

100.00

membership

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

1100.00

**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 11 / 30  
(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)  
Anne Gontownik  
Mailing Address 250 Mountain Rd.  
City Englewood State NJ Zip Code 07631  
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 ▼ 1375.00  
Date of Receipt 08 / 11 / 2009  
Transaction ID: SA11AI.25538  
Amount of Each Receipt this Period 250.00  
earmark-david vitter

**B.** Full Name (Last, First, Middle Initial)  
Anne Gontownik  
Mailing Address 250 Mountain Rd.  
City Englewood State NJ Zip Code 07631  
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 ▼ 2375.00  
Date of Receipt 08 / 11 / 2009  
Transaction ID: SA11AI.25588  
Amount of Each Receipt this Period 1000.00  
earmark-corzine

**C.** Full Name (Last, First, Middle Initial)  
Robert Goodman  
Mailing Address 473 Winthrop Rd.  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia University Occupation Physician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 8877.00  
Date of Receipt 08 / 11 / 2009  
Transaction ID: SA11AI.25589  
Amount of Each Receipt this Period 2000.00  
earmark-corzine

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3250.00  
**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)	PAGE 12 / 30
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert M. Gottesman	Date of Receipt MM / DD / YYYY 08 / 21 / 2009
	Mailing Address 285 Sunset Avenue	Transaction ID: SA11AI.25528
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	membership
Name of Employer Self	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2150.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Josh greenbaum	Date of Receipt MM / DD / YYYY 08 / 11 / 2009
	Mailing Address 37 n. Day St	Transaction ID: SA11AI.25590
	City State Zip Code Orange NJ 07050	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	earmark-corzine
Name of Employer Executive	Occupation Premier Adult Living	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jack Halpern	Date of Receipt MM / DD / YYYY 08 / 11 / 2009
	Mailing Address 160 W. 66th St.	Transaction ID: SA11AI.25539
	City State Zip Code New York NY 10023	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	earmark-david vitter
Name of Employer Atlantic Realty	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 14000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 30

(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)  
annette hochberg

Mailing Address 9 howell dr

City State Zip Code  
west orange NJ 07052

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

Name of Employer Occupation  
n/a n/a

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 54.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 17 / 2009

Transaction ID: SA11AI.25524

Amount of Each Receipt this Period

54.00

membership

**B.**

Full Name (Last, First, Middle Initial)  
Elie Katz

Mailing Address 1001 Pheips Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Teaneck Mayor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 11 / 2009

Transaction ID: SA11AI.25592

Amount of Each Receipt this Period

500.00

earmark-corzine

**C.**

Full Name (Last, First, Middle Initial)  
Mordecai Katz

Mailing Address 300 E. Linden Ave.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Self Physician

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 11 / 2009

Transaction ID: SA11AI.25594

Amount of Each Receipt this Period

2000.00

earmark-corzine

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

2554.00

**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 / 30  
(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)  
Munr Kazmir

Mailing Address 30 Cardine Court

City State Zip Code  
Closter NJ 07624

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

Name of Employer: Federal Drug Agents Foundation  
Occupation: CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3600.00

Date of Receipt: 08 / 11 / 2009  
Transaction ID: SA11AI.25517  
Amount of Each Receipt this Period: 3600.00  
membership

**B.**

Full Name (Last, First, Middle Initial)  
Leon Kozak

Mailing Address 280 Jones Rd.

City State Zip Code  
Englewood NJ 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 ▼  
15140.00

Date of Receipt: 08 / 11 / 2009  
Transaction ID: SA11AI.25595  
Amount of Each Receipt this Period: 1000.00  
earmark-corzine

**C.**

Full Name (Last, First, Middle Initial)  
Aviva Levinson

Mailing Address 300 East 71st St  
Apt 14H

City State Zip Code  
New York NY 10021

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

Name of Employer: IDT Corp  
Occupation: Real Estate Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt: 08 / 11 / 2009  
Transaction ID: SA11AI.25540  
Amount of Each Receipt this Period: 100.00  
earmark-david vitter

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4700.00**

**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 / 30

(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 lichtenstein

Mailing Address 326 Third St

City State Zip Code  
Lakewood NJ 08701

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

Name of Employer Occupation  
Lighthouse Group Real Estate

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.25601

Amount of Each Receipt this Period

1000.00

earmark-corzine

B.

Full Name (Last, First, Middle Initial)

Jason Muss

Mailing Address 181 East 90th

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Muss Development Corp Real Estate Developer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.25607

Amount of Each Receipt this Period

1000.00

conduit-vitter

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Aron Rosenberg

Mailing Address 597 Woodmere Blvd

City State Zip Code  
Woodmere NY 11598

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

Name of Employer Occupation  
Self (Daron Fashions) President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3600.00

Date of Receipt

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

Transaction ID: SA11AI.25596

Amount of Each Receipt this Period

3600.00

earmark-corzine

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

4600.00

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 / 30  
(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)  
Josh schopf

Mailing Address 752 W. End Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
n/a n/a

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 36.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2009

**Transaction ID:** SA11AI.25541

Amount of Each Receipt this Period  
36.00

earmark-david vitter

**B.** Full Name (Last, First, Middle Initial)  
Fernand Schoppik

Mailing Address 76 Woodland Ave

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 118.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 15 / 2009

**Transaction ID:** SA11AI.25523

Amount of Each Receipt this Period  
118.00

membership

**C.** Full Name (Last, First, Middle Initial)  
Roni Silverberg

Mailing Address 2902 Packer Ct.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2009

**Transaction ID:** SA11AI.25526

Amount of Each Receipt this Period  
50.00

membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► **204.00**

**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 / 30  
(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 Spear

Mailing Address 17 Cummings Circle

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2009

**Transaction ID:** SA11AI.25518

Amount of Each Receipt this Period  
150.00

membership

**B.** Full Name (Last, First, Middle Initial)  
Howard Spear

Mailing Address 17 Cummings Circle

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2009

**Transaction ID:** SA11AI.25529

Amount of Each Receipt this Period  
150.00

membership

**C.** Full Name (Last, First, Middle Initial)  
Roy Tanzman

Mailing Address 4 Talia Rd.

City State Zip Code  
Kendall Park NJ 08824

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

Name of Employer Occupation  
Wilentz Goldman and Spitzer  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2009

**Transaction ID:** SA11AI.25519

Amount of Each Receipt this Period  
1000.00

membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

**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 / 30

(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)  
stanley turitz

Mailing Address 787 Ocean Ave #1103

City State Zip Code  
Long Branch NY 07740

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

Name of Employer Self Occupation  
Self 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  
08 / 11 / 2009

Transaction ID: SA11AI.25597

Amount of Each Receipt this Period

1000.00

earmark-corzine

B.

Full Name (Last, First, Middle Initial)  
James Veach

Mailing Address 1337 Dickerson Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Self Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 11 / 2009

Transaction ID: SA11AI.25599

Amount of Each Receipt this Period

500.00

earmark-corzine

C.

Full Name (Last, First, Middle Initial)  
Stephen Weiss

Mailing Address 416 Gloucester St

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Self Occupation  
Self Commodity trader

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 11 / 2009

Transaction ID: SA11AI.25520

Amount of Each Receipt this Period

1360.00

membership

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

2860.00

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 / 30	
	(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"/> 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
---------------------------------------

<b>A.</b>	Full Name (Last, First, Middle Initial) florence wolpoff	Date of Receipt MM / DD / YYYY 08 / 21 / 2009
	Mailing Address n/a	<b>Transaction ID:</b> SA11AI.25544
	City State Zip Code englewood NJ 07631	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	earmark-david vitter
	Name of Employer Occupation retired retired	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	30483.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 30
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) Jim Bunning		Date of Receipt
Mailing Address 1717 Dixie Hwy ste 220		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 21 / 2009
City	State	Zip Code
Ft. Wright	KY	41011
FEC ID number of contributing federal political committee.		Transaction ID: SA16.25617
<input type="text"/> C <input type="text"/> H6KY04015		Amount of Each Receipt this Period
		<input type="text"/> 1860.00
Name of Employer Jim Bunning for Senate	Occupation Senator	reimbursement to Norpac
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text"/> 1860.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1860.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 1860.00

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

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

FOR LINE NUMBER: PAGE 21 / 30  
(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)  
Fidelity Investments

Mailing Address 396 Route 17 North

City State Zip Code  
Paramus NJ 07652

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1642.59

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

**Transaction ID:** SA17.25618

Amount of Each Receipt this Period  
91.41

dividends

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

Mailing Address 1445 Valley Rd

City State Zip Code  
Wayne NJ 07470

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4020.53

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 9

**Transaction ID:** SA17.25613

Amount of Each Receipt this Period  
11.49

CD interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► **102.90**

**TOTAL** This Period (last page this line number only) ..... ► **102.90**

**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 22 / 30

<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) Esther Chouake	Transaction ID: SB21B.25531 Date of Disbursement 08 / 11 / 2009
	Mailing Address 245 Hutchinson Rd.	Amount of Each Disbursement this Period 1000.00
	City Englewood State NJ Zip Code 07631	
	Purpose of Disbursement In-kind - Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) Maadan	Transaction ID: SB21B.25578 Date of Disbursement 08 / 17 / 2009
	Mailing Address 446 Cedar Lane	Amount of Each Disbursement this Period 250.00
	City Teaneck State NJ Zip Code 07666	
	Purpose of Disbursement Ackerman catering Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Leonor Nunez	Transaction ID: SB21B.25564 Date of Disbursement 08 / 20 / 2009
	Mailing Address 526 Longview Ave	Amount of Each Disbursement this Period 406.21
	City Cliffside Park State NJ Zip Code 07010	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1656.21
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 30

<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	Transaction ID: SB21B.25554 Date of Disbursement
	Mailing Address 1551 S. Washington Ave.	<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement taxes	<input type="text" value="357.56"/>
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.25556 Date of Disbursement
	Mailing Address 1551 S. Washington Ave.	<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement invoice	<input type="text" value="109.57"/>
	Candidate Name	Category/Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.25557 Date of Disbursement
	Mailing Address 1551 S. Washington Ave.	<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="92.87"/>
	Candidate Name	Category/Type
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="560.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25561</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="424.91"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25565</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="124.19"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25568</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="360.58"/></p>

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

**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 25 / 30

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25612</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1.34"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Karen Pichkhadze</p> <p>Mailing Address 1038 Kingsland Lane</p> <p>City Fort Lee State NJ Zip Code 07024</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25553</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1046.60"/></p> <p>Category/Type: <input type="text"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Karen Pichkhadze</p> <p>Mailing Address 1038 Kingsland Lane</p> <p>City Fort Lee State NJ Zip Code 07024</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.25560</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1185.49"/></p> <p>Category/Type: <input type="text"/></p>

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

**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) Karen Pichkhadze	Transaction ID: SB21B.25567
	Mailing Address 1038 Kingsland Lane	Date of Disbursement MM / DD / YYYY 08 / 28 / 2009
	City State Zip Code Fort Lee NJ 07024	Amount of Each Disbursement this Period 1053.00
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	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.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.25558
	Mailing Address 1445 Valley Rd	Date of Disbursement MM / DD / YYYY 08 / 11 / 2009
	City State Zip Code Wayne NJ 07470	Amount of Each Disbursement this Period 48.25
	Purpose of Disbursement checks reorder	Category/ Type
	Candidate Name	
	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) ▼

C.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.25562
	Mailing Address 1445 Valley Rd	Date of Disbursement MM / DD / YYYY 08 / 17 / 2009
	City State Zip Code Wayne NJ 07470	Amount of Each Disbursement this Period 102.33
	Purpose of Disbursement bank fee	Category/ Type
	Candidate Name	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1203.58
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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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	Transaction ID: SB21B.25614 Date of Disbursement
	Mailing Address 1445 Valley Rd	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period
	Purpose of Disbursement merchant fee Candidate Name	<input type="text" value="10.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text" value="001"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon wireless	Transaction ID: SB21B.25566 Date of Disbursement
	Mailing Address PO Box 17120	<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City Tucson State AZ Zip Code 85731	Amount of Each Disbursement this Period
	Purpose of Disbursement cell phone/internet Candidate Name	<input type="text" value="174.88"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Washington Convention Center	Transaction ID: SB21B.25569 Date of Disbursement
	Mailing Address 801 Mount Vernon PI NW	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement deposit-mission to washington 2010 Candidate Name	<input type="text" value="3100.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type <input type="text"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3284.88"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="9847.78"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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) corzine 09	Transaction ID: SB23.25573 Date of Disbursement 08 / 17 / 2009
	Mailing Address one gateway center	Amount of Each Disbursement this Period 3000.00
	City newark State NJ Zip Code 07012	
	Purpose of Disbursement norpac donation	Category/ Type
	Candidate Name corzine 09	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NJ District:	

B.	Full Name (Last, First, Middle Initial) David Vitter for U.S. Senate	Transaction ID: SB23.25574 Date of Disbursement 08 / 17 / 2009
	Mailing Address 6577 General Diaz St.	Amount of Each Disbursement this Period 5000.00
	City New Orleans State LA Zip Code 70124	
	Purpose of Disbursement norpac donation	Category/ Type
	Candidate Name David Vitter for U.S. Senate	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: LA District:	

C.	Full Name (Last, First, Middle Initial) David Vitter for U.S. Senate	Transaction ID: SB23.25575 Date of Disbursement 08 / 17 / 2009
	Mailing Address 6577 General Diaz St.	Amount of Each Disbursement this Period 6701.00
	City New Orleans State LA Zip Code 70124	
	Purpose of Disbursement earmarked donations	Category/ Type
	Candidate Name David Vitter for U.S. Senate	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: LA District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	14701.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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) David Vitter for U.S. Senate  Mailing Address 6577 General Diaz St.  City New Orleans State LA Zip Code 70124  Purpose of Disbursement earmark-wolpoff Candidate Name David Vitter for U.S. Senate Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25582 Date of Disbursement 08 / 25 / 2009  Amount of Each Disbursement this Period 100.00  Category/ Type
B.	Full Name (Last, First, Middle Initial) David Vitter for U.S. Senate  Mailing Address 6577 General Diaz St.  City New Orleans State LA Zip Code 70124  Purpose of Disbursement conduit-jason muss Candidate Name David Vitter for U.S. Senate Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25610 Date of Disbursement 08 / 25 / 2009  Amount of Each Disbursement this Period 1000.00  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) NJDCS  Mailing Address 1 gateway cntr  City newark State NJ Zip Code 07012  Purpose of Disbursement earmark-kozak.lichtenstein Candidate Name corzine 09 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25580 Date of Disbursement 08 / 25 / 2009  Amount of Each Disbursement this Period 2000.00  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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) NJDCS	Transaction ID: SB23.25583
	Mailing Address 1 gateway cntr	Date of Disbursement 08 / 28 / 2009
	City newark State NJ Zip Code 07012	Amount of Each Disbursement this Period 13600.00
	Purpose of Disbursement earmarks for Corzine event	Category/ Type
	Candidate Name corzine 09	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NJDCS	Transaction ID: SB23.25584
	Mailing Address 1 gateway cntr	Date of Disbursement 08 / 28 / 2009
	City newark State NJ Zip Code 07012	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement norpac donation (corzine event)	Category/ Type
	Candidate Name corzine 09	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STEVE ISRAEL FOR CONGRESS COMMITTEE	Transaction ID: SB23.25572
	Mailing Address 15 ORMOND STREET	Date of Disbursement 08 / 05 / 2009
	City DIX HILLS State NY Zip Code 11746	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement solicitation-Rabbi Genack	Category/ Type
	Candidate Name STEVE ISRAEL FOR CONGRESS COMMITTEE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	31801.00