

**FEC FORM 3**

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

RECEIVED  
2014 FEB 12 AM 9:47  
Office Use Only  
MAIL CENTER

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Gandolfo For New Jersey

ADDRESS (number and street)

PO Box 180



Check if different than previously reported. (ACC)

CLARKSBORO

US

08510

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00550681

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

US

04

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

MM / DD / YYYY

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

10 01 2013

through

12 31 2013

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

Cambria Stubelt

Signature of Treasurer

Cambria Stubelt

Date

01 31 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)

14031183281

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

GANDHI FOR NEW JERSEY

Report Covering the Period: From:

10 01 2013

To:

12 31 2013

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)) ....

201543

(b) Total Contribution Refunds  
(from Line 20(d)) .....

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) .....

201543

7. Net Operating Expenditures

(a) Total Operating Expenditures  
(from Line 17) .....

50486

(b) Total Offsets to Operating  
Expenditures (from Line 14) .....

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) .....

50486

8. Cash on Hand at Close of  
Reporting Period (from Line 27) .....

251057

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) .....

100000

For further information contact:

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

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

14031183282

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

*CANDIDATE FOR NEW JERSEY*

Report Covering the Period: From:

**10 01 2013**

To:

**12 31 2013**

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

*same*

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A) .....
  - (ii) Unitemized .....
  - (iii) TOTAL of contributions from individuals .....
- Political Party Committees .....
- Other Political Committees (such as PACs) .....
- (d) The Candidate .....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

**1,582.43**

**1,582.43**

**433.00**

**2,015.43**

**same**

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

**0.00**

**0.00**

13. LOANS:

- (a) Made or Guaranteed by the Candidate .....
- (b) All Other Loans .....
- (c) TOTAL LOANS (add Lines 13(a) and (b)) .....

**1,750.00**

**1,750.00**

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) .....

**3,765.43**

**3,765.43**

14031183283

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

*same*

17. OPERATING EXPENDITURES.....

50486

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

19. LOAN REPAYMENTS:

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

(b) Of All Other Loans .....

75000

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

75000

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) ►

125486

125486

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

376543

25. SUBTOTAL (add Line 23 and Line 24).....

376543

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

125486

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25).....

251057

14031183284

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

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

FOR LINE NUMBER: PAGE 1 OF 3  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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) **CANDIDATE FOR NEW JERSEY**

**A.** Full Name (Last, First, Middle Initial) **SEAN MAONEY**

Mailing Address **204 NORTH ST. APT 1**

City **BURLINGTON VT** State **VT** Zip Code **05401**

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

Name of Employer **SELF-EMPLOYED** Occupation **DIGITAL MEDIA**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **100000**

Date of Receipt **11 15 2013**

Amount of Each Receipt this Period **1,000.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**1,000.00**

14031183285

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

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

FOR LINE NUMBER: PAGE 2 OF 3  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
GANDOLFO FOR NEW JERSEY

**A.** Full Name (Last, First, Middle Initial)  
Gandolfo, Angela M

Mailing Address  
PO BOX 292

City  
CLARKSBURG, NJ State NJ Zip Code 08510

FEC ID number of contributing federal political committee.  
C

Name of Employer  
NONE Occupation  
NONE

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3300

Date of Receipt  
10 11 2013

Amount of Each Receipt this Period  
33.00

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

Mailing Address  
SAME AS ABOVE

City  
CLARKSBURG, NJ State NJ Zip Code 08510

FEC ID number of contributing federal political committee.  
C

Name of Employer  
NONE Occupation  
NONE

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
23300

Date of Receipt  
10 18 2013

Amount of Each Receipt this Period  
200.00

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

Mailing Address  
SAME AS ABOVE

City  
CLARKSBURG, NJ State NJ Zip Code 08510

FEC ID number of contributing federal political committee.  
C

Name of Employer  
NONE Occupation  
NONE

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43300

Date of Receipt  
10 18 2013

Amount of Each Receipt this Period  
200.00

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

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

433.00

14031183286

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

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

FOR LINE NUMBER: PAGE 1 OF 3  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**A.** Full Name (Last, First, Middle Initial) Maloney, Seth

Mailing Address 204 NORTH ST. APT 1

City BURLINGTON State VT Zip Code 05401

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation Digital Media

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date 175000

Date of Receipt 11 19 2013

Amount of Each Receipt this Period 1750.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... 1750.00

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

14031183287

**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 1 OF 2

17 20a  18 20b  19a 20c  19b 21

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NAME OF COMMITTEE (In Full) **GANDOLFO FOR NEW JERSEY**

**A.** Full Name (Last, First, Middle Initial) **LAMANA, Lila** Date of Disbursement **10 22 2013**  
 Mailing Address **2053 Morning Dew Lane**  
 City **FLOYD VA** State **VA** Zip Code **24091** Amount of Each Disbursement this Period **120.00**  
 Purpose of Disbursement **web development / graphic design** Category/Type **004**  
 Candidate Name **ANGELA GANDOLFO**  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)  
 State: **NS** District: **04**

**B.** Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Disbursement **10 18 2013**  
 Mailing Address **SAME**  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Amount of Each Disbursement this Period **200.00**  
 Purpose of Disbursement \_\_\_\_\_ Category/Type \_\_\_\_\_  
 Candidate Name \_\_\_\_\_  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Disbursement \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Amount of Each Disbursement this Period \_\_\_\_\_  
 Purpose of Disbursement \_\_\_\_\_ Category/Type \_\_\_\_\_  
 Candidate Name \_\_\_\_\_  
 Office Sought:  House  Senate  President Disbursement For:  Primary  General  Other (specify)  
 State: \_\_\_\_\_ District: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional) ..... **320.00**  
**TOTAL** This Period (last page this line number only) .....

14031183288



**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)

17  
20a  18  
20b  19a  
20c  19b  
21

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NAME OF COMMITTEE (In Full)  
**GANDOLFO for New Jersey**

A. Full Name (Last, First, Middle Initial)  
**MAIONEY, SEEN**

Mailing Address  
**204 NORTH ST APT 1**

City  
**Burlington** State **VT** Zip Code **05401**

Purpose of Disbursement  
**payment of website cost**

Candidate Name  
**Angela Gandolfo**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: **VT** District: **04**

Date of Disbursement  
**12 03 2013**

Amount of Each Disbursement this Period  
**750.00**

Category/Type  
**009**

B. Full Name (Last, First, Middle Initial)

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

Category/Type

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

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

Category/Type

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

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

**750.00**

14031183289

**SCHEDULE D (FEC Form 3)  
DEBTS AND OBLIGATIONS  
Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Gandolfo for New Jersey**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SETH MALONEY</b>	Nature of Debt (Purpose): <b>Expense paid for website</b>
Mailing Address <b>204 NORTH ST. Apt. 1</b>	
City State Zip Code <b>Burlington VT 05401</b>	

Outstanding Balance Beginning This Period <b>0.00</b>	Amount Incurred This Period <b>1,750.00</b>	Payment This Period <b>750.00</b>	Outstanding Balance at Close of This Period <b>1,000.00</b>
--	--	--------------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

1) SUBTOTALS This Period This Page (optional) .....	
2) TOTALS This Period (last page this line number only) .....	<b>1,000.00</b>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<b>1,000.00</b>

14031183290

Candidate for New Jersey

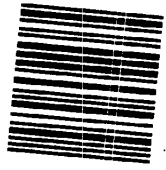
PO Box 180

Clarkstown, NJ 08510

14031183291



1000



20463

U.S. POSTAGE  
PAID  
ROOSEVELT, NJ  
08555  
JAN 31, 14  
AMOUNT

\$1.40  
00042777-04

Federal Election Commission

999 E Street, NW

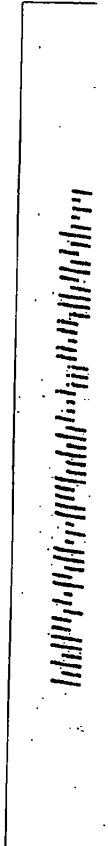
Washington, DC

20463

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
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USPS First Class Mail Postmarked  
1/31/14

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express 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



PREPARER  
(8/2013)

2/12/14  
DATE PREPARED

14031183292