### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

	For An Authorized Committee	Office Use Only
	FEC MAILING LABEL TYPE OR PRINT W Example: If typing, type over the lines	
Committee To Reelect Congres		
ADDRESS (number and street)	O. Box 3184	
Check if different		
than previously reported. (ACC)	amilton	NJ 08619
2. FEC IDENTIFICATION NUMBER	CITY 🛦	STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
C00096412	3. IS THIS X NEW (N) OR	AMENDED (A) NJ 04
4. TYPE OF REPORT (Choose (a) Quarterly Reports:	e One) (b) 12-Day <b>PRE</b> -Election Report for the:	
April 45 Overteels Barre	Primary (12P)	General (12G) Runoff (12R)
April 15 Quarterly Repor	Convention (12C)	Special (12S)
X July 15 Quarterly Report	(Q2)	in the
October 15 Quarterly Re	eport (Q3) Election on	State of
January 31 Year-End Re	eport (YE) (c) 30-Day <b>POST</b> -Election Report for the:	
	General (30G)	Runoff (30R) Special (30S)
Termination Report (TEI	R) Election on	in the State of
5. Covering Period 0 4	0 1 2 0 0 7 through 0 6	30 2007
	rt and to the best of my knowledge and belief it is true, correc	ct and complete.
Type or Print Name of Treasurer	Constance Carey	
Signature of Treasurer Electronical	y Filed by Constance Carey	Date 0 7 1 5 2 0 0 7
NOTE : Submission of false, erroneous	s, or incomplete information may subject the person signing t	this Report to the penalties of 2 U.S.C 437g.
Office Use Only		FEC FORM 3 (Revised 02/2003)

### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) Page 2 Write or Type Committee Name Committee To Reelect Congressman Chris Smith ° D 0 6 2007 From: 0 4 0.1 2007 Report Covering the Period: To: 3 0 **COLUMN B COLUMN A This Period Election Cycle-to-Date** Net Contributions (other than loans) (a) Total Contributions 10710.00 17177.68 (other than loans) (from Line 11(e))...... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d))..... (c) Net Contributions (other than loans) 10710.00 17177.68 (subtract Line 6(b) from Line 6(a))....... 7. Net Operating Expenditures (a) Total Operating Expenditures 14351.99 56596.79 (from Line 17)..... (b) Total Offsets to Operating 664.24 664.24 Expenditures (from Line 14)..... (c) Net Operating Expenditures 13687.75 55932.55 (subtract Line 7(b) from Line 7(a))....... Cash on Hand at Close of 201850.20 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

### For further information contact:

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

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

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003) Page 3 Write or Type Committee Name Committee To Reelect Congressman Chris Smith ° D Report Covering the Period: 0 4 2007 06 2007 0 1 3 0 From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 1200.00 (i) Itemized (use Schedule A)..... 210.00 5427.68 (ii) Unitemized..... (iii) TOTAL of contributions 210.00 6627.68 from individuals..... 0.00 0.00 (b) Political Party Committees..... (c) Other Political Committees 10500.00 10550.00 (such as PACS)..... 0.00 0.00 (d) The Candidate..... (e) TOTAL CONTRIBUTIONS (other than loans) 10710.00 17177.68 (add Lines 11(a)(iii), (b), (c), and (d)) 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES..... 13. LOANS (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... (c) TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 664.24 664.24 (Refunds, Rebates, etc.).... 15. OTHER RECEIPTS 2204.51 2703.22 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...... 13578.75 20545.14

FEC Form 3 (Revised 02/2003)

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	14351.99	56596.79
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:  (a) Of Loans Made or Guaranteed	0.00	0.00
	by the Candidate	0.00	0.00
	(b) Of all Other Loans	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	2010.00	7020.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	16361.99	63616.79
	III. CASH SUMMA	ARY	
23.	CASH ON HAND AT BEGINNING OF REPORTING	PERIOD	204633.44
24.	TOTAL RECEIPTS THIS PERIOD (from Line 16, page	ge3)	13578.75
25.	SUBTOTAL (add Line 23 and Line 24)		218212.19
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line	e 22)	16361.99
27.	CASH ON HAND AT CLOSE OF REPORTING PER	:IOD	201850.20

### FEC FORM 3Z-1 (File with Form 3)

# CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19) (Millionaires' Amendment)

	Name of Candidate				Candidate ID Number
	Christopher H. Smith	H8NJ04014			
	Name of Principal Campaign Cor Committee To Reelect Congressman Chri		е		C C00096412
	Committee Address P.O. Box 3184				
	City S	tate	ZIP		
	Hamilton	NJ	08619-		
	Report Covering Period (check on	e) [	x through June 30, or the preceding the year of the gen	•	ecember 31 of the year tion
			Primary		General
1.	Gross receipts of authorized committees		20545.14		0.00
2.	Aggregate amount of contributions from personal funds of the candidate		0.00		0.00
3.	. Gross receipts minus the candidate's personal contributions	Ĺ,	20545.14		0.00

FE3AN044 FEC **Form 3Z-1** (Revised 01/03)

SI	CHEDULE A (FEC Form 3 )			FOR LINE NUMBER: PAGE 6 / 28
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 11d
				12   13a   13b   14   15
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	Committee To Reelect Congressman C	Chris Smith		
۹.	Full Name (Last, First, Middle Initial) Air Line Pilots Assn. PAC			Date of Receipt
	Mailing Address 1625 Massachusetts Av	ve., NW		04 10 2007
	City	State	Zip Code	Transaction ID: 70412.C29016
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer	Occupatio	n	Receipt
		1		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008  X Primary General	Election (	Cycle-to-Date ▼	Specially (2 creation and control of
	Other (specify)		5000.00	
	Full Name (Last, First, Middle Initial) Carpenters Legislative Improvement Committee			Date of Receipt
•	Mailing Address 101 Constitution Ave.			M M / D D / Y Y Y Y
	21		7.0.1	06 29 2007
	City	State DC	Zip Code	Transaction ID: 70712.C29036
	Washington	DC	20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer	Occupatio	n	Receipt
				Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General Other (specify) ▼	0 0	2500.00	
_	Full Name (Last, First, Middle Initial)			Date of Description
j.	Laborers Political League  Mailing Address 905 16th Street NW			Date of Receipt
				06 07 2007
	City	State	Zip Code	Transaction ID: 70626.C29033
	Washington	DC	20006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer	Occupatio	n	Receipt  Limit Increased Due to Opponent's
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)
	X Primary General		· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼	0 0	2000.00	
s	UBTOTAL of Receipts This Page (optional)			9500.00
	· · · · · · · ·		<u> </u>	
T	OTAL This Period (last page this line number of	only)	<b>&gt;</b>	

FOR LINE NUMBER: PAGE 7/28 SCHEDULE A (FEC Form 3 ) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 12 13a 13b 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) Committee To Reelect Congressman Chris Smith Full Name (Last, First, Middle Initial) Natl Assn of Letter Carriers AFL-CIO Date of Receipt Mailing Address 100 Indiana Avenue, N.W. 0.4 10 2007 City Zip Code State **Transaction ID: 70412.C29017** Washington DC 20001-2144 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1000.00
TOTAL This Period (last page this line number only)	•	10500.00

	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 28 (check only one)  11a 11b 11c 11d 11d 12 13a 13b X 14 15
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Committee To Reelect Congressman Ch	nris Smith		
۹.	Full Name (Last, First, Middle Initial) Verizon Campaign			Date of Receipt
	Mailing Address 7821 New Falls Road, F			05 14 2007
	City	State	Zip Code	Transaction ID: 70518.C29027
	Levittown	PA	19055-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1.21
	Name of Employer  Receipt For: 2008  X Primary General Other (specify) ▼	Occupation  Election C	ocycle-to-Date ▼	Offsets to Operating Expenditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Full Name (Last, First, Middle Initial)			Data of Danaira
5.	Verizon Campaign  Mailing Address 7821 New Falls Road, F	Floor 3		Date of Receipt    M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 70518.C29026
	Levittown	PA	19055-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		663.03
	Name of Employer	Occupation	n	Offsets to Operating Expenditu Limit Increased Due to Opponent's
	Receipt For: 2008  X Primary General  Other (specify)	Election C	Cycle-to-Date ▼ 664.24	Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	664.24
TOTAL This Period (last page this line number only)	<b>•</b>	664.24

SC	CHEDULE A (FEC Form 3)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 28			
ΙT	EMIZED RECEIPTS		or each category of the	(check only one)			
			Detailed Summary Page	12 13a 13b 14 X 15			
An or	y information copied from such Reports and s for commercial purposes, other than using th	Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
$\overline{}$	NAME OF COMMITTEE (In Full)						
$\rangle$	Committee To Reelect Congressman	Chris Smith					
۹.	Full Name (Last, First, Middle Initial) Roma Federal Savings Bank			Date of Receipt			
	Mailing Address 2300 Route 33			04 / 18 / 2007			
	City	State	Zip Code	Transaction ID: 70518.C29024			
	Robbinsville F50 ID	NJ	08691-1411	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1937.50			
	Name of Employer	Occupation	n	Other Receipt			
	Descript Form 2000	Tipotion C	Viole to Data	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2008  X Primary General	Election C	Cycle-to-Date ▼				
	Other (specify) ▼	0 0	2436.21				
3.	Full Name (Last, First, Middle Initial) Roma Federal Savings Bank			Date of Receipt			
	Mailing Address 2300 Route 33	04 30 7 2007					
	City	State	Zip Code	Transaction ID: 70518.C29029			
	Robbinsville	NJ	08691-1411	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		51.11			
	Name of Employer	Occupation	n	Other Receipt			
		1		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			
	Receipt For: 2008  X Primary General	Election C	Cycle-to-Date ▼	Spaniag (2 3.3.3			
	Other (specify)		2487.32				
— C.	Full Name (Last, First, Middle Initial) Roma Federal Savings Bank			Date of Receipt			
	Mailing Address 2300 Route 33			05 31 YYYY 2007			
	City	State	Zip Code	Transaction ID: 70626.C29035			
	Robbinsville	NJ	08691-1411	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		52.05			
	Name of Employer	Occupation	n	Other Receipt  Limit Increased Due to Opponent's			
	Receipt For: 2008	Election C	Cycle-to-Date ▼	Spending (2 U.S.C. 441a(i)/441a-1)			
	X Primary General		0520.27	1			
	Other (specify)	0 0	2539.37				
SI	UBTOTAL of Receipts This Page (optional) .			2040.66			
T	OTAL This Period (last page this line number	r only)					

FOR LINE NUMBER: PAGE 10/28 SCHEDULE A (FEC Form 3 ) Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 12 13a 13b X 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) Committee To Reelect Congressman Chris Smith Full Name (Last, First, Middle Initial) A. Roma Federal Savings Bank Date of Receipt Mailing Address 2300 Route 33 06 30 2007 City State Zip Code Transaction ID: 70713.C29038 Robbinsville NJ 08691-1411 Amount of Each Receipt this Period FEC ID number of contributing C 47.85 federal political committee. Other Receipt Name of Employer Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Receipt For: 2008 Election Cycle-to-Date X Primary General 2587.22 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	47.85
TOTAL This Period (last page this line number only)	<b>•</b>	2088.51

C	CHEDIII E D /EEC Earm 2 \			
3	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 11 / 28
IT	EMIZED DISBURSEMENTS	for each category of the	(check onl	<u> </u>
		Detailed Summary Page		X 17 18 19a 19b
_				20a 20b 20c 21
	y Information copied from such Reports and Statem			
Or	for commercial purposes, other than using the name	and address of any political	committee to st	blicit contributions from such committee
$  \setminus $	NAME OF COMMITTEE (In Full)			
$\angle$	Committee To Reelect Congressman Chris	Smith		
	Full Name (Last, First, Middle Initial)			Transaction ID: 70415.E3482
Α.	Guinco, Jacobson, Lucas For Council			Date of Disbursement
	Mailing Address c/o Linda Trench			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	444 E. Main Street			
	,	State Zip Code NJ 08736-		Amount of Each Disbursement this Period
		100 00730-		-35.00
	Purpose of Disbursement D: VOIDED CHECK			Refund or Disposal of Excess
	Candidate Name		Category/	Contributions Required Under
	Candidate Name		Type	11 C.F.R. 400.53
	Office Sought: House Disburse	ment For:	71	
	Senate	Primary General		D: VOIDED CHECK
	President	Other (specify) ▼		
	State: District:	•		
	Full Name (Last, First, Middle Initial)			Transaction ID: 70626.E3522
В.	Central NJ Council BSA			Date of Disbursement
		0 6 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 4315 US Highway 1 Sout	<u>h</u>		06 15 2007
	,	State Zip Code		Amount of Each Disbursement this Period
		NJ 08852-		1500.00
	Purpose of Disbursement EVENT TICKETS		Refund or Disposal of Excess	
	Candidate Name	Category/		Contributions Required Under
			Туре	11 C.F.R. 400.53
	Office Sought: House Disburse	ment For:		EVENT TICKETS
	Senate	Primary General		EVENT HORETS
	President	Other (specify)		
	State: District:			
_	Full Name (Last, First, Middle Initial)			Transaction ID: 70518.E3490
C.	New Jersey State AFL-CIO			Date of Disbursement
	Mailing Address 815 Sixteenth Street, NW			$\begin{bmatrix} 0 & 4 & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	Mailing Address 815 Sixteenth Street, NW			
	City	State Zip Code		Amount of Each Disbursement this Period
	Washington	DC 20006-		
	Purpose of Disbursement		500.00	
	JOURNAL AD		Refund or Disposal of Excess	
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53
	Office Sought: House Disburse	ment For:	**	IOLIDAIAL AD
	Senate	Primary General		JOURNAL AD
	President	Other (specify)		
_	State: District:			
s	UBTOTAL of Disbursements This Page (optional) .		<b>)</b>	1965.00
_				

Ç,	CHEDULE B (FEC Form 3)		1 ===	CHEDIII E B (EEC Form 2 )						
•		Use seperate schedule(s)	FOR LINE (check only	NUMBER: PAGE 12 / 28 y one)						
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	` <u>-</u> -	X 17						
	ly Information copied from such Reports and Statem for commercial purposes, other than using the name									
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
/	Committee To Reelect Congressman Chris	s Smith								
۹.	Full Name (Last, First, Middle Initial) Cablevision of Hamilton			Transaction ID: 70412.E3477 Date of Disbursement						
	Mailing Address PO Box 371378			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & O & O & T \end{smallmatrix} \end{bmatrix}$						
		State Zip Code PA 15250-		Amount of Each Disbursement this Period						
	Purpose of Disbursement CABLE MODEM-DEVON			49.95  Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Senate President	ement For: Primary General Other (specify)		CABLE MODEM-DEVON						
	State: District: Full Name (Last, First, Middle Initial)									
3.	Cablevision of Hamilton			Transaction ID: 70518.E3486 Date of Disbursement						
	Mailing Address PO Box 371378			$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & O & T \end{smallmatrix} \end{bmatrix}$						
	•	State Zip Code PA 15250-		Amount of Each Disbursement this Period						
	Purpose of Disbursement CABLE MODEM - HQ			49.95  Refund or Disposal of Excess						
	Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53						
	Office Sought: House Disburse Senate President	ement For:  Primary  General  Other (specify)		CABLE MODEM - HQ						
	State: District:									
Э.	Full Name (Last, First, Middle Initial) Cablevision of Hamilton			<b>Transaction ID:</b> 70518.E3496  Date of Disbursement						
	Mailing Address PO Box 371378			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$						
		State Zip Code PA 15250-		Amount of Each Disbursement this Period						
	Purpose of Disbursement			99.90						
	CABLE MODEMS Candidate Name		Category/	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53						
		ement For:	Туре	CABLE MODEMS						
	State: State:	Primary General Other (specify) ▼								
s	SUBTOTAL of Disbursements This Page (optional) .		<b>)</b>	199.80						

nage	# 21 990233302						
	CHEDULE B (FEC Form 3		erate schedule(s)	FOR LINE		PAGE 13 / 28	
Ш	ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			X 17 18 19 20a 20b 20	ш
	y Information copied from such Reports a for commercial purposes, other than usin					for the purpose of solicating	contributions
abla	NAME OF COMMITTEE (In Full)						
$\rangle$	Committee To Reelect Congressn	nan Chris	Smith				
_	Full Name (Last, First, Middle Initial)					Transaction ID: 70626	S.F3526
A.	Cablevision of Hamilton					Date of Disbursement	
	Mailing Address PO Box 371378					06 7 25	<sup>Y</sup> 2007
	City Pittsburgh		State PA	Zip Code 15250-		Amount of Each Disburs	sement this Period
	Purpose of Disbursement				-		99.90
	CABLE MODEMS					Refund or Disposal	of Excess
	Candidate Name				Category/ Type	Contributions Requirements 11 C.F.R. 400.53	red Under
	Office Sought: House Senate President		nent For: Primary Other (spe	General		CABLE MODEMS	
	State: District:		(-	- 37 🔻			
	Full Name (Last, First, Middle Initial)					Transaction ID: 70518	R F3/101
В.	Chase Card Services					Date of Disbursement	L0401
	Mailing Address PO Box 15153					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 4 \end{smallmatrix} \end{bmatrix}$	<sup>Y</sup> 2007
	City Wilmington		State DE	Zip Code 19886-		Amount of Each Disburs	sement this Period
	Purpose of Disbursement CREDIT CARD: SEE BELOW					Refund or Disposal	47.79
	Candidate Name				Category/ Type	Contributions Requirement 11 C.F.R. 400.53	
	Office Sought: House Senate	Disburser	nent For: Primary	General		CREDIT CARD: SEE	BELOW
	President State: District:		Other (spe				
	Full Name (Last, First, Middle Initial)						
C.	Shell Oil					Transaction ID: 70518 Date of Disbursement	
	Mailing Address Route 33 West					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	<sup>Y</sup> 2007
	City Hamilton Square		State NJ	Zip Code 08690-		Amount of Each Disburs	sement this Period
	Purpose of Disbursement				• •		47.79
	Candidate Name				Category/	Refund or Disposal Contributions Requil 11 C.F.R. 400.53	
	Office Sought: House	Disburser	ment For		Туре	[MEMO ITEM]	
	Senate		Primary	General		MEMO:	
	State: President District:		Other (spe	ecity) 🔻			
	District.						

147.69

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

SCHEDULE B (FEC Form 3 )			erate schedule(s)	FOR LINE	E NUMBER: PAGE 14 / 28			
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page	(check onl	y one)  X 17			
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	Committee To Reelect Congressman Chris	s Smith						
Α.	Full Name (Last, First, Middle Initial) Chase Card Services  Mailing Address PO Box 15153				Transaction ID: 70626.E3508 Date of Disbursement  0 5			
	City	State	Zip Code		Amount of Each Disbursement this Period			
	Wilmington	DE	19886-		117.00			
	Purpose of Disbursement CREDIT CARD: SEE BELOW		117.26  Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Senate President	ement For: Primary Other (spe	General cify) ▼		CREDIT CARD: SEE BELOW			
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В.	Full Name (Last, First, Middle Initial) Shell Oil				<b>Transaction ID:</b> 70626.E3509  Date of Disbursement			
	Mailing Address Route 33 West				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & S \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & S \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & Y \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} V & Z & D & Y & Y \\ D & Z & D & Y \end{bmatrix} \ \ \\ \begin{bmatrix} D & D & D \\ D & Z & D & Y \\ D & D & Z & D & Z \end{bmatrix} \ \ \\ \begin{bmatrix} D & D & D \\ D & D \\ D & D & D \\ D \\ D & D \\ D \\ D & D \\ D & D \\ D & D \\ D & D \\ D \\ D & D \\ D & D \\ D \\ D \\ D & D \\ D \\ D & D \\ D \\ D \\ D & D \\ D \\$			
	,	State NJ	Zip Code 08690-		Amount of Each Disbursement this Period			
	Purpose of Disbursement TRAVEL EXPENSE		62.71  Refund or Disposal of Excess					
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼		[MEMO ITEM] MEMO: TRAVEL EXPENSE			
	State: District:							
C.	Full Name (Last, First, Middle Initial) Staples				<b>Transaction ID:</b> 70626.E3510 Date of Disbursement			
	Mailing Address Hamilton Square 670 No	rth Route	33		05 M / 28 / Y 2007 Y			
	City Hamilton	State NJ	Zip Code 08619-		Amount of Each Disbursement this Period			
	Purpose of Disbursement OFFICE SUPPLIES				54.55  Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		[MEMO: OFFICE SUPPLIES			
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Ν	NAME OF COMMITTEE (In Full)						
$\mathbb{Z}$	Committee To Reelect Congressman	n Chris Smith					
Α.	Full Name (Last, First, Middle Initial)				Transaction ID: 70626.E3524		
Α.	Chase Card Services				Date of Disbursement		
	Mailing Address PO Box 15153				$\begin{bmatrix} \begin{smallmatrix} M & 6 & M \\ 0 & 6 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$		
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	Purpose of Disbursement CREDIT CARD: SEE BELOW				Refund or Disposal of Excess		
	Candidate Name			Category/	Contributions Required Under		
				Type	11 C.F.R. 400.53		
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	President	Other (sp	General				
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	Robbinsville	NJ	08691-		847.02		
	Purpose of Disbursement PAYROLL		Refund or Disposal of Excess				
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
	ÿ	isbursement For:			PAYROLL		
	Senate President	Other (sp	General		7,111,022		
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	Full Name (Last, First, Middle Initial)				Transaction ID: 70518.E3483		
C.	Constance Carey				Date of Disbursement		
	Mailing Address 21 Devon Court				$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{bmatrix}D&2&0\\2&0\end{bmatrix}/\begin{bmatrix}Y&Y&2&0&7&Y\\2&0&0&7&Y\end{bmatrix}$		
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	Senate	Primary	General		PAYROLL		
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Ν	NAME OF COMMITTEE (In Full)							
V	Committee To Reelect Congressman Chris	s Smith						
Α.	Full Name (Last, First, Middle Initial) Constance Carey				Transaction ID: 70626.E3530 Date of Disbursement			
	Mailing Address 21 Devon Court	$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ I & D \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I & I \end{smallmatrix} \end{bmatrix}$						
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	State: District:	Tanor (opeony)						
В.	Full Name (Last, First, Middle Initial) Constance Carey		Transaction ID: 70712.E3534 Date of Disbursement					
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	Purpose of Disbursement PAYROLL	Т	847.  Refund or Disposal of Excess					
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	Office Sought: House Disburse Senate President	ement For:  Primary Gene  Other (specify)	eral		PAYROLL			
	State: District:	Other (specify)						
C.	Full Name (Last, First, Middle Initial) Federal Express				Transaction ID: 70518.E3487 Date of Disbursement			
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		State Zip Code PA 15250-74	461		Amount of Each Disbursement this Period			
	Purpose of Disbursement COURIER		Т	• •	13.51  Refund or Disposal of Excess			
	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
	Office Sought: House Disburse Senate President	ement For:    Primary   Gene   Other (specify)   ▼	eral		COURIER			
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$\overline{\ }$	NAME OF COMMITTEE (In Full)				
/	Committee To Reelect Congressman Chr	is Smith			
۹.	Full Name (Last, First, Middle Initial) Federal Express				Transaction ID: 70626.E3507 Date of Disbursement
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	Mailing Address P.O. Box 371461				05 28 2007
	City Pittsburgh		Zip Code 15250-7461		Amount of Each Disbursement this Period
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	Candidate Name		(	Category/ Type	11 C.F.R. 400.53
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	Office Sought: House Disburs Senate	ement For: Primary	General		COURIER
	President	Other (specif			
	State: District:				
Э.	Full Name (Last, First, Middle Initial) William Kenny, DMD				Transaction ID: 70518.E3494 Date of Disbursement
	Mailing Address 304 White Horse Road				05 01 7 2007
	City Hamilton		Zip Code 08610-		Amount of Each Disbursement this Period
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	Candidate Name			Category/ Type	Contributions Required Under 11 C.F.R. 400.53
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### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 19/28 Use seperate schedule(s) (check only one) for each category of the 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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) Committee To Reelect Congressman Chris Smith Full Name (Last, First, Middle Initial) Transaction ID: 70626.E3505 William Kenny, DMD Date of Disbursement 28 0 5 2007 Mailing Address 304 White Horse Road City State Zip Code Amount of Each Disbursement this Period Hamilton NJ 08610-500.00 Purpose of Disbursement RENT HQ Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **RENT HQ** General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 70626.E3523 William Kenny, DMD Date of Disbursement 25 0 6 2007 Mailing Address 304 White Horse Road City State Zip Code Amount of Each Disbursement this Period 08610-Hamilton NJ 500.00 Purpose of Disbursement RENT HQ Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: **RENT HQ** Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 70412.E3475 C. Paychex, Inc. Date of Disbursement 2007 Mailing Address PO Box 387 City State Zip Code Amount of Each Disbursement this Period 08053-0387 Marlton NJ 8.05 Purpose of Disbursement WORKERS COMP INSURANCE Refund or Disposal of Excess Contributions Required Under Candidate Name Category/ 11 C.F.R. 400.53 Type Office Sought: House Disbursement For: WORKERS COMP INSURANCE Senate Primary General President Other (specify) State: District:

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17	Committee To Reelect Congres	sman Chris	Smith					
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	Candidate Name	Category/	Refund or Disposal of Excess Contributions Required Under					
					Type	11 C.F.R. 400.53		
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	Candidate Name Cate					Contributions Required Under		
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	Candidate Name				Category/ Type	Contributions Required Under 11 C.F.R. 400.53		
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	Office Sought: House Senate	Disburse	Primary	General		PROFESSIONAL	SERVICES
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	Senate President		Primary Other (spec	General			
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C.	Paychex, Inc.					Date of Disburseme	
	Mailing Address PO Box 387	7				05 / 18	2007
	City Marlton		State NJ	Zip Code 08053-0387		Amount of Each Dis	bursement this Period
	Purpose of Disbursement				* *		12.22
	WORKERS COMP INSURANCE Candidate Name				0.1	Refund or Dispo Contributions Re	
	Candidate Name				Category/ Type	11 C.F.R. 400.5	
	Office Sought: House	Disburse	ment For:		21 -	WORKERS COM	
	Senate		Primary	General		WORKERS COM	F INSUDANCE
	State: President District:		Other (spec	city) 🔻			
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s	UBTOTAL of Disbursements This	Page (optional) .					566.50

C.

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

age	e# 27990233312				
	CHEDULE B (FEC Form 3 ) EMIZED DISBURSEMENTS	for each	erate schedule(s) category of the Summary Page	(check only	X 17 18 19a 19b
	y Information copied from such Reports and Stat for commercial purposes, other than using the na				
$\rangle$	NAME OF COMMITTEE (In Full)  Committee To Reelect Congressman Ch	nris Smith			
Α.	Full Name (Last, First, Middle Initial) Paychex, Inc.  Mailing Address PO Box 387			Transaction ID: 70626.E3514  Date of Disbursement  O 6 O 1 O 7	
	City MarIton  Purpose of Disbursement PAYROLL TAXES IMPOUNDED  Candidate Name	State NJ	Zip Code 08053-0387	Category/ Type	Amount of Each Disbursement this Period  439.50  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought:  Senate President  State:  Disbut	rsement For: Primary Other (spe	General cify)		PAYROLL TAXES IMPOUNDED
В.	Full Name (Last, First, Middle Initial) Paychex, Inc.  Mailing Address PO Box 387				Transaction ID: 70626.E3515 Date of Disbursement  M 6 M / D 1 / Y 2 0 0 7 Y
	City MarIton Purpose of Disbursement WORKERS COMP INSURANCE Candidate Name	State NJ	Zip Code 08053-0387	Category/ Type	Amount of Each Disbursement this Period  12.22  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

621.50

Purpose of Disbursement WORKERS COMP INSURANCE			Refund or Disposal of Excess			
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
Office Sought:  House Senate President  State:  District:	Disbursement For:  Primary General  Other (specify) ▼		WORKERS COMP INSURANCE			
Full Name (Last, First, Middle Initial) Paychex, Inc.			Transaction ID: 70626.E3516 Date of Disbursement			
Mailing Address PO Box 387			$ \begin{bmatrix} M & 6 \\ 0 & 6 \end{bmatrix} \begin{bmatrix} D & 0 \\ 0 & 7 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \\ 7 \end{bmatrix} $			
City Marlton	State Zip Code NJ 08053-0387		Amount of Each Disbursement this Period			
Purpose of Disbursement PROFESSIONAL SERVICES			169.78  Refund or Disposal of Excess			
Candidate Name		Category/ Type	Contributions Required Under 11 C.F.R. 400.53			
Office Sought: House Senate President State: District:	Disbursement For:  Primary General  Other (specify) ▼		PROFESSIONAL SERVICES			
State: District:						

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Office Sought:

House

### **SCHEDULE B (FEC ITEMIZED DISBURS**

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$\rangle$	NAME OF COMM Committee To	IITTEE (In Full) Reelect Congress	man Chris Smith				
Full Name (Last, First, Middle Initial) <b>A.</b> Paychex, Inc.						Transaction ID: 70 Date of Disburseme	ent
	Mailing Address	PO Box 387				06 / 15	2007
	City Marlton		State NJ	Zip Code 08053-0387		Amount of Each Dis	sbursement this Period
	Purpose of Disbur WORKERS COM Candidate Name				Category/	Refund or Dispo Contributions Re	equired Under
	Office Sought: State:	House Senate President District:	Disbursement For Primary Other (s		Туре	WORKERS COM	
В.	Full Name (Last, F Paychex, Inc.					Transaction ID: 70 Date of Disburseme	
	Mailing Address	PO Box 387				06 / 15	2007
	City Marlton		State NJ	Zip Code 08053-0387		Amount of Each Dis	sbursement this Period
	Purpose of Disbur PAYROLL TAXES				· · ·	439.50 osal of Excess	
	Candidate Name				Category/ Type	Contributions Re 11 C.F.R. 400.5	equired Under
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<b>.</b>	Paychex, Inc.  Mailing Address	PO Box 387				Date of Disburseme	2 0 0 7
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	WORKERS COM Candidate Name	IP INSURANCE			Category/	Refund or Dispo	

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11 C.F.R. 400.53

Office Sought:	House	Dispursement For:	WORKERS COMP INSURANCE					
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	Candidate Name						egory/ /pe	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53									
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	Purpose of Disbursement											82.93			
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	Candidate Name	Categ Typ		Contributions Required Under 11 C.F.R. 400.53											
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	Mailing Address P.O. Box 17464		04 24 2007												
	City State Zip Code							Amount of Each Disbursement this Period							
	Baltimore MD 21297-1464							69.02							
	Purpose of Disbursement CELL 8984							Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53							
	Candidate Name Category/														
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City

Baltimore

**CELL 8984** 

Candidate Name

Office Sought:

State:

Purpose of Disbursement

House

Senate

District:

President

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

FOR LINE NUMBER: PAGE 27 / 28 Use seperate schedule(s) (check only one) for each category of the 17 18 19b **Detailed Summary Page** 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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) Committee To Reelect Congressman Chris Smith Full Name (Last, First, Middle Initial) Transaction ID: 70518.E3498 Verizon Wireless Date of Disbursement 0 5 2007 Mailing Address P.O. Box 17464 City State Zip Code Amount of Each Disbursement this Period Baltimore MD 21297-1464 72.28 Purpose of Disbursement **CELL 8984** Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: House **CELL 8984** Primary General Senate President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 70626.E3527 Verizon Wireless Date of Disbursement 25 0 6 2007 Mailing Address P.O. Box 17464

State

MD

Disbursement For:

Primary

Other (specify)

Zip Code

21297-1464

General

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Amount of Each Disbursement this Period

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11 C.F.R. 400.53

**CELL 8984** 

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## SCHEDULE B (FEC Form 3 )

FOR LINE NUMBER: PAGE 28/28 Use seperate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the Detailed Summary Page 18 19b 20a 20b 20c 21 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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) Committee To Reelect Congressman Chris Smith Full Name (Last, First, Middle Initial) **Transaction ID: 70626.E3533** Rick Renzi For Congress Date of Disbursement 16 0 5 2007 Mailing Address 122 E. Route 66, #2 City State Zip Code Amount of Each Disbursement this Period Flagstaff ΑZ 86001-2000.00 Purpose of Disbursement CONTRIBUTION Refund or Disposal of Excess Candidate Name Contributions Required Under Category/ 11 C.F.R. 400.53 Type Office Sought: Disbursement For: 2008 House contribution Senate X Primary General President Other (specify) State: District:

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