



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	2

D	D
2	8

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" style="display: inline-table; border-collapse: collapse;"><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 .....	463397.93									
(c) Total Receipts (from Line 19) .....	42962.48	56411.43								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	506360.41	511734.84								
7. Total Disbursements (from Line 31) .....	16364.58	21739.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	489995.83	489995.83								
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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	2

D	D
2	8

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	36671.50	44853.50
(i) Itemized (use Schedule A) .....	4320.00	8719.00
(ii) Unitemized .....	40991.50	53572.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	40991.50	53572.50
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	449.78
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1970.98	2389.15
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)) .....	42962.48	56411.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	42962.48	56411.43

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	61.47	61.47
(b) Other Federal Operating Expenditures.....	16303.11	18677.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	16364.58	18739.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
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	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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	16364.58	21739.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16303.11	21677.54

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	40991.50	53572.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40991.50	53572.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16303.11	18677.54
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	449.78
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16303.11	18227.76

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 25  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
Harry Bernstein

Mailing Address 28 Columbia Ave.

City State Zip Code  
Colonia NJ 07067

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Semple Bixel Assoc. Fund Raiser

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 2 4 / 2 0 0 9

**Transaction ID:** SA11AI.23886

Amount of Each Receipt this Period  
350.00

mission

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

Mailing Address 5 Weyant Drive

City State Zip Code  
Cedarhurst NJ 11516

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

**Transaction ID:** SA11AI.23869

Amount of Each Receipt this Period  
325.00

Mission

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

Mailing Address 2526 Stafford Pl.

City State Zip Code  
Columbus OH 43209

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
0 2 / 2 7 / 2 0 0 9

**Transaction ID:** SA11AI.24000

Amount of Each Receipt this Period  
250.00

mission

**SUBTOTAL** of Receipts This Page (optional) ..... 925.00

**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 7 / 25  
(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**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anne Gontownik</p> <p>Mailing Address 250 Mountain Rd.</p> <p>City State Zip Code <b>Englewood NJ 07631</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer none Occupation homemaker</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">275.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 24 / 2009</span></p> <p><b>Transaction ID: SA11AI.23890</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">275.00</span></p> <p>mission</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Robert Goodman</p> <p>Mailing Address 473 Winthrop Rd.</p> <p>City State Zip Code <b>Teaneck NJ 07666</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Columbia University Occupation Physician</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1925.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 27 / 2009</span></p> <p><b>Transaction ID: SA11AI.23906</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1925.00</span></p> <p>mission</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Jack Halpern</p> <p>Mailing Address 160 W. 66th St.</p> <p>City State Zip Code <b>New York NY 10023</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Atlantic Realty Occupation Real Estate</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 12 / 2009</span></p> <p><b>Transaction ID: SA11AI.23861</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">4875.00</span></p> <p>Membership</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">7075.00</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: PAGE 8 / 25  
(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)  
Marc Hanfling

Mailing Address 47 Leslie St.

City Edison State NJ Zip Code 08817

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 ▼ 250.00

Date of Receipt 02 / 05 / 2009

**Transaction ID:** SA11AI.23852

Amount of Each Receipt this Period 250.00

Mission

**B.**

Full Name (Last, First, Middle Initial)  
Barry Honig

Mailing Address 151 Deerfield Drive

City Tenafly State NJ Zip Code 07670

FEC ID number of contributing federal political committee. C

Name of Employer North Jersey Republicans Occupation executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 04 / 2009

**Transaction ID:** SA11AI.23850

Amount of Each Receipt this Period 275.00

Mission

**C.**

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 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 ▼ 5000.00

Date of Receipt 02 / 09 / 2009

**Transaction ID:** SA11AI.23946

Amount of Each Receipt this Period 5000.00

donation

**SUBTOTAL** of Receipts This Page (optional) ..... 5525.00

**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 9 / 25  
(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)  
Rosalyn Kozak

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07632

FEC ID number of contributing federal political committee. C

Name of Employer Englewood Hospital Occupation MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 03 / 2009

**Transaction ID:** SA11AI.24001

Amount of Each Receipt this Period 5000.00

membership

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

Mailing Address 280 Main St.

City Metuchen State NJ Zip Code 08840

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 ▼ 250.00

Date of Receipt 02 / 23 / 2009

**Transaction ID:** SA11AI.23883

Amount of Each Receipt this Period 250.00

mission

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

Mailing Address 22 Brookfall Road

City Edison State NJ Zip Code 08810

FEC ID number of contributing federal political committee. C

Name of Employer DTCC Occupation Systems Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 25 / 2009

**Transaction ID:** SA11AI.23984

Amount of Each Receipt this Period 250.00

mission

**SUBTOTAL** of Receipts This Page (optional) ..... 5500.00

**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 10 / 25
	<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) sy oshinsky	Date of Receipt MM / DD / YYYY 02 / 01 / 2009
	Mailing Address 44 beechwood terrace	<b>Transaction ID:</b> SA11AI.23844
	City State Zip Code Yonkers NY 10705	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	Mission
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ruth Roth	Date of Receipt MM / DD / YYYY 02 / 06 / 2009
	Mailing Address 597 Rutland Ave	<b>Transaction ID:</b> SA11AI.23985
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission
Name of Employer Self	Occupation Freelance Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ronald Rubin	Date of Receipt MM / DD / YYYY 02 / 22 / 2009
	Mailing Address 3530 Henry Hudson Pkwy Apt 3J	<b>Transaction ID:</b> SA11AI.23878
	City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission
Name of Employer CUNY	Occupation Educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 25  
(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)  
Sheryl Schainker

Mailing Address 713 Norma Ct.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Holy Name Hospital Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 02 / 2009

Transaction ID: SA11AI.23846

Amount of Each Receipt this Period 225.00

Mission

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

Mailing Address 29 Brookfall Road

City Edison State NJ Zip Code 08817

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 09 / 2009

Transaction ID: SA11AI.23858

Amount of Each Receipt this Period 225.00

Mission

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

Mailing Address 464 Maitland Ave

City Teaneck State NJ Zip Code 07631

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

Name of Employer Self Occupation Office Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 04 / 2009

Transaction ID: SA11AI.23947

Amount of Each Receipt this Period 400.00

donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00

**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 12 / 25  
(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)  
Stanley Scher

Mailing Address 3333 Henry Hudson Pkwy  
Apt 20 J

City State Zip Code  
Bronx NY 10463

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

Name of Employer none Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** SA11AI.23849

Amount of Each Receipt this Period  
125.00

Mission

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

Mailing Address 33 Witherspoon  
3rd floor

City State Zip Code  
Princeton NJ 08542

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

Name of Employer Self Occupation Financial Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** SA11AI.23862

Amount of Each Receipt this Period  
5000.00

Membership

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

Mailing Address 33 Witherspoon St.

City State Zip Code  
Princeton NJ 08542

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

Name of Employer none Occupation housewife

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

**Transaction ID:** SA11AI.23863

Amount of Each Receipt this Period  
5000.00

Membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10125.00

**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 13 / 25  
(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)  
Samuel Solomon

Mailing Address 272 West 107th Street

City State Zip Code  
New York NY 10025

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

Name of Employer DOAR Litigation Consulting      Occupation CEO

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 02 / 25 / 2009  
Transaction ID: SA11AI.23898  
Amount of Each Receipt this Period: 375.00  
mission

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

Mailing Address 103 Edgemont Pl

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Goldman Sachs      Occupation Computer Analyst

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 02 / 14 / 2009  
Transaction ID: SA11AI.23866  
Amount of Each Receipt this Period: 275.00  
Mission

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

Mailing Address 1317 Hudson Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer none      Occupation student

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 02 / 23 / 2009  
Transaction ID: SA11AI.23959  
Amount of Each Receipt this Period: 350.00  
mission

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**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 / 25  
(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)  
Leslie Tugetman  
 Mailing Address 612 West 232 Street  
 City Riverdale State NY Zip Code 10463  
 Date of Receipt MM / DD / YYYY 02 / 01 / 2009  
**Transaction ID:** SA11AI.23948  
 Amount of Each Receipt this Period 250.00  
 mission  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Self Occupation Interior Design  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Weinstein  
 Mailing Address 11 Anthony Ave.  
 City Edison State NJ Zip Code 08820  
 Date of Receipt MM / DD / YYYY 02 / 02 / 2009  
**Transaction ID:** SA11AI.23979  
 Amount of Each Receipt this Period 46.50  
 In-kind -  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 677.50

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Weinstein  
 Mailing Address 11 Anthony Ave.  
 City Edison State NJ Zip Code 08820  
 Date of Receipt MM / DD / YYYY 02 / 28 / 2009  
**Transaction ID:** SA11AI.23981  
 Amount of Each Receipt this Period 100.00  
 In-kind -  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 777.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 396.50  
**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 / 25  
(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)  
Mark Wiesen

Mailing Address 668 North Forest Drive

City State Zip Code  
Teaneck NJ 07666

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 ▼ 1325.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2009

Transaction ID: SA11AI.23860

Amount of Each Receipt this Period  
1325.00

Mission

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

Mailing Address 128 N. 8th Ave

City State Zip Code  
Highland Park NJ 08904

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 ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
02 / 23 / 2009

Transaction ID: SA11AI.23885

Amount of Each Receipt this Period  
225.00

mission

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

Mailing Address 20 Basswood Lane

City State Zip Code  
Moreland Hills OH 44022

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

Name of Employer Mallard Investments Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2009

Transaction ID: SA11AI.23864

Amount of Each Receipt this Period  
2500.00

Membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4050.00

**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 / 25  
(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) Bernard Zweig		Date of Receipt
Mailing Address 393 West End Ave.		<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.23873
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="325.00"/>
Name of Employer Self (Zweig Financial)	Occupation Finance	Mission
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="325.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="325.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="36671.50"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 25  
(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 ▼  
669.09

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

**Transaction ID:** SA17.23938

Amount of Each Receipt this Period  
256.92

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 ▼  
1720.06

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

**Transaction ID:** SA17.23967

Amount of Each Receipt this Period  
1708.60

CD-interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1965.52**

**TOTAL** This Period (last page this line number only) ..... ► **1965.52**

# 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 18 / 25

<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) Mindy Berman</p> <p>Mailing Address 312 Cedar Ave</p> <p>City Highland Park State NJ Zip Code 08904</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.23910</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <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="310.43"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mindy Berman</p> <p>Mailing Address 312 Cedar Ave</p> <p>City Highland Park State NJ Zip Code 08904</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.23932</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <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="182.67"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Event Emissary LLC</p> <p>Mailing Address P. O. Box575</p> <p>City Washington State DC Zip Code 20044-0575</p> <p>Purpose of Disbursement Mission</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.23926</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <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="11139.22"/></p> <p>Category/Type: <input type="text" value="003"/></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 20 / 25

<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.23929</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <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 style="text-align: center;"><input type="text" value="462.66"/></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.23933</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <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 style="text-align: center;"><input type="text" value="66.13"/></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.23934</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <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 style="text-align: center;"><input type="text" value="38.34"/></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 21 / 25

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement service fee 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>Transaction ID:</b> SB21B.23940 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 9	Amount of Each Disbursement this Period 346.43
<b>B.</b>	Full Name (Last, First, Middle Initial) Karen Pichkhadze Mailing Address 1038 Kingsland Lane City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement Payroll 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>Transaction ID:</b> SB21B.23909 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 1081.52
<b>C.</b>	Full Name (Last, First, Middle Initial) Karen Pichkhadze Mailing Address 1038 Kingsland Lane City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement Payroll 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>Transaction ID:</b> SB21B.23928 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 1184.45

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

2612.40

**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)

<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.23930
	Mailing Address 1445 Valley Rd	Date of Disbursement MM / DD / YYYY 02 / 17 / 2009
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period 92.76
	Purpose of Disbursement credit card Candidate Name	001 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) Verizon wireless	Transaction ID: SB21B.23914
	Mailing Address PO Box 17120	Date of Disbursement MM / DD / YYYY 02 / 04 / 2009
	City Tucson State AZ Zip Code 85731	Amount of Each Disbursement this Period 295.69
	Purpose of Disbursement Cell Phones Candidate Name	001 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) Jeffrey Weinstein	Transaction ID: SB21B.23980
	Mailing Address 11 Anthony Ave.	Date of Disbursement MM / DD / YYYY 02 / 02 / 2009
	City Edison State NJ Zip Code 08820	Amount of Each Disbursement this Period 46.50
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>434.95</b>
<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 / 25

<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) Jeffrey Weinstein			Transaction ID: SB21B.23982	
	Mailing Address 11 Anthony Ave.			Date of Disbursement 02 / 28 / 2009	
	City Edison	State NJ	Zip Code 08820	Amount of Each Disbursement this Period 100.00	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	16299.11

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address  
1445 Valley Rd

City	State	Zip Code
Wayne	NJ	07470

001  
Category/  
Type

Purpose of Disbursement:  
service fee

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative    Fundraising    Exempt  
 Voter Drive    Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61.47

Date 

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

Transaction ID: H4.23944

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		61.47		61.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		61.47		61.47

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		61.47		61.47

Form/Schedule: F3XN

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