

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 15 JUL 13 PM 2:57 Office Use Only

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

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 31

Check if different than previously reported. (ACC)

PALISADES PARK

NJ

07650

2. FEC IDENTIFICATION NUMBER

C00558122

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CITY STATE ZIP CODE STATE DISTRICT

NJ

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X 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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01 01 2015

through

03 31 2015

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 Rich Danker

Signature of Treasurer

Asst. R/Dank

Date

07 13 2015

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)

201507130200181301

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2015

To:

MM / DD / YYYY
03 / 31 / 2015

	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)) ...	5700.00	563122.38
(b) Total Contribution Refunds (from Line 20(d)) ..	300.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	5400.00	562922.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	9136.79	512834.93
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	9136.79	512834.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	945.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	22298.63	

For further information contact:

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

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

201507130200181302

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 14

Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2015

To:

MM / DD / YYYY
03 / 31 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	5700.00	415224.93
(ii) Unitemized.....	0.00	79172.45
(iii) TOTAL of contributions from individuals .	5700.00	494397.38
(b) Political Party Committees...	0.00	2000.00
(c) Other Political Committees (such as PACs)...	0.00	66725.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5700.00	563122.38
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	2500.00	30000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	2500.00	30000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.13
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	8200.00	593122.51

201507130200181303

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	9136.79	512834.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	30000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	30000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	300.00	200.00
(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))...	300.00	200.00
21. OTHER DISBURSEMENTS	0.00	1636.25
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9436.79	544671.18

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	2182.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	8200.00
25. SUBTOTAL (add Line 23 and Line 24) ...	10382.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	9436.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	945.95

201507130200181304

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 14		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Alfred A Angelo		Date of Receipt MM / DD / YYYY 03 / 19 / 2015
Mailing Address 340 North Avenue East		Transaction ID : SA11AI.8197
City Crawford	State Zip Code NJ 07016	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer Horizon Partners	Occupation General Partner	Election Cycle-to-Date 2700.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Lawrence Whipple		Date of Receipt MM / DD / YYYY 03 / 19 / 2015
Mailing Address 26 Cannon Ct		Transaction ID : SA11AI.8196
City Basking Ridge	State Zip Code NJ 07920	
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3000.00	
Name of Employer MSW Capital	Occupation Attorney	Election Cycle-to-Date 3000.00
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	5700.00

201507130200181305

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
JEFFREY BELL

Mailing Address **132 CHRISTIE ST**

City **LEONIA** State **NJ** Zip Code **07605**

FEC ID number of contributing federal political committee. **C S8NJ00012**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 24 / 2015

Transaction ID : **SA13A.8199**

Amount of Each Receipt this Period
2500.00

Candidate Loan

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
 M M / D D / Y Y Y Y

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2500.00

2500.00

201507130200181306

**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 7 OF 14

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. JEFFREY BELL		Date of Disbursement MM/DD/YYYY 02/02/2015
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 128.00 Transaction ID : SB17.8208
City LEONIA	State NJ	Zip Code 07605
Purpose of Disbursement PO Box Renewal	Category/ Type 001	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM/DD/YYYY 02/01/2015
Mailing Address 360 Broad Ave		Amount of Each Disbursement this Period 128.00 Transaction ID : SB17.8208.0 [MEMO ITEM]
City Princeton	State NJ	Zip Code 07605
Purpose of Disbursement PO Box Renewal	Category/ Type 001	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement MM/DD/YYYY 03/01/2015
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 1207.00 Transaction ID : SB17.8222
City Charlotte	State NC	Zip Code 28272
Purpose of Disbursement Credit Card Payment	Category/ Type 001	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	1335.00
TOTAL This Period (last page this line number only).....	

201507130200181307

**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 8 OF 14

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Chase

Full Name (Last, First, Middle Initial)
Chase

Mailing Address PO Box 15123

City Wilmington State DE Zip Code 19850

Purpose of Disbursement
Credit Card Payment

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement: 03 / 24 / 2015

Amount of Each Disbursement this Period: 1022.00

Transaction ID: SB17.8223

Category/Type: 001

B. Gia Coluccio

Full Name (Last, First, Middle Initial)
Coluccio

Mailing Address 310 Prospect Ave Apt. 331

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Campaign Consulting

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement: 01 / 07 / 2015

Amount of Each Disbursement this Period: 1300.00

Transaction ID: SB17.8200

Category/Type: 001

C. Rich Danker

Full Name (Last, First, Middle Initial)
Danker

Mailing Address PO Box 31

City Palisades Park State NJ Zip Code 07650

Purpose of Disbursement
Expense Reimbursement

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement: 03 / 30 / 2015

Amount of Each Disbursement this Period: 333.86

Transaction ID: SB17.8216

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 3155.86

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

201507130200181308

**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)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. NJ Turnpike		Date of Disbursement MM / DD / YYYY 03 / 30 / 2015
Mailing Address PO Box 5042		Amount of Each Disbursement this Period 333.86 Transaction ID : SB17.8216.0 [MEMO ITEM]
City Woodbridge	State NJ	
Zip Code 07095	Purpose of Disbursement Tolls	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 00	

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement MM / DD / YYYY 01 / 21 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 84.65 Transaction ID : SB17.8203
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Accounting Software	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 00	

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement MM / DD / YYYY 02 / 27 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 84.65 Transaction ID : SB17.8211
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Accounting Software	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 00	

SUBTOTAL of Disbursements This Page (optional).....	169.30
TOTAL This Period (last page this line number only).....	

201507130200181309

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement MM / DD / YYYY 03 / 27 / 2015
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 92.45 Transaction ID : SB17.8215
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Accounting Software Category/Type 001	
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. TCD Compliance, LLC		Date of Disbursement MM / DD / YYYY 03 / 02 / 2015
Mailing Address 3365 Cherry Lane Unit D		Amount of Each Disbursement this Period 379.08 Transaction ID : SB17.8212
City Woodbury State MN Zip Code 55129	Purpose of Disbursement Accounting and Reporting Category/Type 001	
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) c. U.S. Treasury Department		Date of Disbursement MM / DD / YYYY 03 / 24 / 2015
Mailing Address 1500 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 3731.21 Transaction ID : SB17.8221
City Washington State DC Zip Code 20220	Purpose of Disbursement Tax Payment Category/Type 001	
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional).....	4202.74
TOTAL This Period (last page this line number only).....	

201507130200181310

**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 11 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (in Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM/DD/YYYY 02/02/2015
Mailing Address 360 Broad Ave		Amount of Each Disbursement this Period 6.05 Transaction ID : SB17.8204
City Princeton	State NJ	
Zip Code 07605	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name BELL FOR SENATE	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 00	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM/DD/YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6.05
TOTAL This Period (last page this line number only).....	8868.95

201507130200181311

**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 12 OF 14	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Lawrence Whipple		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 26 Cannon Ct		Amount of Each Disbursement this Period 300.00 Transaction ID : SB20A.8225
City Basking Ridge	State NJ Zip Code 07920	
Purpose of Disbursement Refund of Contribution	Category/Type 001	
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	300.00

201507130200181312

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BELL FOR SENATE** Transaction ID : SC/10.8199

LOAN SOURCE Full Name (Last, First, Middle Initial) **JEFFREY BELL** [PERSONAL FUNDS] Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 24 / 2015	12/31/2015	0.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	2500.00
TOTALS This Period (last page in this line only) ...	2500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201507130200181313

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

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital One		Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 71083		
City Charlotte	State NC	Zip Code 28272

Outstanding Balance Beginning This Period 14559.79	Transaction ID : SD10.5743	
Amount Incurred This Period 0.00	Payment This Period 1207.00	Outstanding Balance at Close of This Period 13352.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase		Nature of Debt (Purpose): Credit Card Debt
Mailing Address PO Box 15123		
City Wilmington	State DE	Zip Code 19850

Outstanding Balance Beginning This Period 7467.84	Transaction ID : SD10.8167	
Amount Incurred This Period 0.00	Payment This Period 1022.00	Outstanding Balance at Close of This Period 6445.84

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) ...	19798.63
2) TOTALS This Period (last page this line number only) ...	19798.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...	2500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ...	22298.63

201507130200181314

Hand Delivered

201507130200181315

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED

7-13-15
Date of Receipt

USPS FIRST CLASS MAIL

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED

Postmark

USPS PRIORITY MAIL

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

UPS

DHL

AIRBORNE EXPRESS

RECEIVED FROM FEDERAL ELECTION COMMISSION

Date of Receipt

POSTMARK ILLEGIBLE

POSTMARK

FAX

Date of Receipt

OTHER

Date of Receipt or Postmark

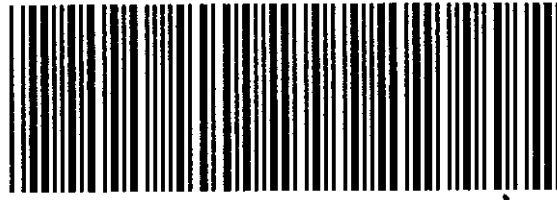
PREPARER

DH

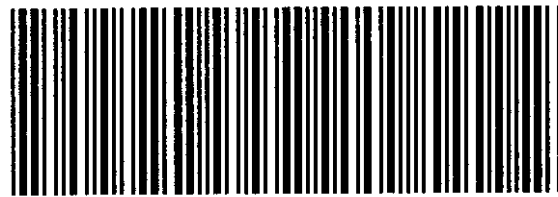
DATE PREPARED

7-13-15

201507130200181316



SEN PATCH



SEN PATCH

201507130200181317