

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

NORPAC

ADDRESS (number and street)

PO Box 5595

☐Check if different
than previously
reported. (ACC)

Englewood

NJ

07631

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00247403

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

☐☐☐in the
State of☐(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

07

01

2008

through

07

31

2008

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

Jeffrey Weinstein

Signature of Treasurer

Electronically Filed by Jeffrey Weinstein

Date

04

17

2008

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 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		491423.12
(b) Cash on Hand at Beginning of Reporting Period	491390.06	
(c) Total Receipts (from Line 19)	17175.99	281106.57
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	508566.05	772529.69
7. Total Disbursements (from Line 31)	14819.83	278783.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	493746.22	493746.22
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)	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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

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	16650.00	210383.47
(i) Itemized (use Schedule A)		
(ii) Unitemized	336.00	62917.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	16986.00	273300.47
(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) ➤	16986.00	273300.47
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	44.10
17. Other Federal Receipts (Dividends, Interest, etc.)	189.99	7762.00
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))	17175.99	281106.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17175.99	281106.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9819.83	195764.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	9819.83	195764.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	79819.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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	3200.00
(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	3200.00
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))..	14819.83	278783.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14819.83	278783.47

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	16986.00	273300.47
34. Total Contribution Refunds (from Line 28(d))	0.00	3200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16986.00	270100.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9819.83	195764.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9819.83	195764.47

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

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

FOR LINE NUMBER: PAGE 6 / 56

(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)

Ben Adler

Mailing Address 1290 Trafalgar St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goldman Sachs

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.22810

Amount of Each Receipt this Period

1500.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Howard Baruch

Mailing Address 130 Dwight Pl.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.22763

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Howard Baruch

Mailing Address 130 Dwight Pl.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22820

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

250.00

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 / 56

(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)

Ben Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2175.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.24004

Amount of Each Receipt this Period

50.00

In-kind - RENT - USE OF
OFFICE SPACE

B.

Full Name (Last, First, Middle Initial)

Ben Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4175.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.22765

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Esther Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.22766

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

6050.00

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 8 / 56

(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)

Marshall Cooper

Mailing Address 35 Anderson Road

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22907

Amount of Each Receipt this Period

2000.00

check to Team Sununu

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Reuven Escott

Mailing Address 55 Regent St.

City

Bergenfield

State

NJ

Zip Code

07621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Securities Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22787

Amount of Each Receipt this Period

2300.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Dan Federbush

Mailing Address 234 E. Linden Ave.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tandem Components

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.22832

Amount of Each Receipt this Period

180.00

check to McConnell Senate
Committee

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 / 56

(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)

Jonathan Fischer

Mailing Address 86 Davison Pl

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington Mutual

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22788

Amount of Each Receipt this Period

200.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Jack Forgash

Mailing Address 1279 Trafalgar Street

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Businessman

Occupation
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22789

Amount of Each Receipt this Period

2000.00

check to McCain Victory
08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Susie Gitler

Mailing Address 384 Warwick Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Finance

Occupation
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22792

Amount of Each Receipt this Period

2500.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 10 / 56

(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)

Jonathan Gold

Mailing Address 137 Mineral Springs Ave.

City

Passaic

State

NJ

Zip Code

07055

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 ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22794

Amount of Each Receipt this Period

500.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Anne Gontownik

Mailing Address 250 Mountain Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22796

Amount of Each Receipt this Period

2500.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Jerry Gontownik

Mailing Address 250 Mountain Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stone Post Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22795

Amount of Each Receipt this Period

2500.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 11 / 56

(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)

Jack Gross

Mailing Address 1990 Presidential Dr.

City

Whitehall

State

PA

Zip Code

18052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22797

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Jack Halpern

Mailing Address 160 W. 66th St.

City

New York

State

NY

Zip Code

10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Realty

Occupation
Real Estate

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 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22912

Amount of Each Receipt this Period

500.00

credit card to Team Sununu

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Lynn 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
Cardiac Diagnostic Serv-
ices

Occupation
Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22798

Amount of Each Receipt this Period

100.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 / 56

(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)

Shira Jacobs

Mailing Address 118 Dana Pl

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 30 / 2008

Transaction ID: SA11AI.22811

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Monique Katz

Mailing Address 300 E Linden Ave

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia Presbyterian

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 13 / 2008

Transaction ID: SA11AI.22777

Amount of Each Receipt this Period

2300.00

check to McCain Victory
2008

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Mordecai Katz

Mailing Address 300 E. Linden Ave.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 13 / 2008

Transaction ID: SA11AI.22785

Amount of Each Receipt this Period

2300.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 / 56

(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)

Mordecai Katz

Mailing Address 300 E. Linden Ave.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.22786

Amount of Each Receipt this Period

20400.00

check to RNC

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Lawrence Kluger

Mailing Address 35 Ellsworth Dr.

City

Warren

State

NJ

Zip Code

07059

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 ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22799

Amount of Each Receipt this Period

500.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

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

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22821

Amount of Each Receipt this Period

10000.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL 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 14 / 56

(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)

George Kuhl

Mailing Address 4101 Pine Tree Drive

City

Miami Beach

State

FL

Zip Code

33410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22800

Amount of Each Receipt this Period

5000.00

check to McCain Victory
08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Joshua Landes

Mailing Address 740 W 232nd Street

City

Riverdale

State

NY

Zip Code

10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wynnefield Capital

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4975.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.22760

Amount of Each Receipt this Period

4850.00

C.

Full Name (Last, First, Middle Initial)

Robert Lebovics

Mailing Address 156 Dwight Pl.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22913

Amount of Each Receipt this Period

500.00

credit card to Team Sununu

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 56

(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)

Kevin Lemmer

Mailing Address 140 Downey Dr.

City

Tenafly

State

NJ

Zip Code

07670

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADAR Investment Management

Occupation

Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22914

Amount of Each Receipt this Period

500.00

credit card to Team Sununu

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Daniel Lewis

Mailing Address 92 Chestnut Place

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gem Asset Management

Occupation

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.22818

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Marvin Lipsky

Mailing Address 28 Lakeview Dr

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Associates Digestive Dis-
eases

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.22757

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

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 / 56

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☒ 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)

Jason Muss

Mailing Address 181 East 90th

City

New York

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation

Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.22862

Amount of Each Receipt this Period

1000.00

check to McConnell Senate
Committee 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Lawrence Pomeranc

Mailing Address 203 Walnut Street

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thompson Hotel Associates
LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.22826

Amount of Each Receipt this Period

1000.00

check to McConnell Senate
Committee 08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Michael Pomeranc

Mailing Address 276 E Linden Ave

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.22825

Amount of Each Receipt this Period

1000.00

check to McConnell Senate
Committee 08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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

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(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)

Ethel Scher

Mailing Address 3333 Henry Hudson Pkwy

City

Bronx

State

NY

Zip Code

10463

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.22822

Amount of Each Receipt this Period

50.00

check to McCain Victory
08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

David Schlusel

Mailing Address 153 Fort Lee Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Key Properties

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22909

Amount of Each Receipt this Period

1000.00

check to Team Sununu

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Martin Schneider

Mailing Address 19 Harrison St.

City

Edison

State

NJ

Zip Code

08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Millennium Eye Care

Occupation

MD

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 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22802

Amount of Each Receipt this Period

100.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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

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☒ 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)

James Schwalbe

Mailing Address 320 Walnut St.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
James E Schwalbe PC

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22803

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Jamie Schwartz

Mailing Address 1190 The Strand

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22804

Amount of Each Receipt this Period

6500.00

check to McCain Victory
08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Bryna Shuchat

Mailing Address 740 West 232nd St

City

Riverdale

State

NY

Zip Code

10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

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 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.22759

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

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
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(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)

Roger Sofer

Mailing Address 8856 Chatsworth

City

Houston

State

TX

Zip Code

77024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sofer Steiner & Assoc.,
L.L.P.

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.22911

Amount of Each Receipt this Period

1000.00

check to Team Sununu

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Cheryl Spielman

Mailing Address 251 Sunset Avenue

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst and Young

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.22828

Amount of Each Receipt this Period

100.00

check to Klein for Congress

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Steven Tennenbaum

Mailing Address 500 Warwick Ave

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Importer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22813

Amount of Each Receipt this Period

5000.00

check to McCain Victory 08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 20 / 56

(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)

Lee Weinblatt

Mailing Address 797 Winthrop Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Pretesting Co.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22814

Amount of Each Receipt this Period

1000.00

check to McCain Victory
08

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Jaime Weiss

Mailing Address 3 Horizon Road

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22815

Amount of Each Receipt this Period

1000.00

credit card to McCain Vic-
tory 08

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Deena Wruble

Mailing Address 670 South Forest Drive

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22806

Amount of Each Receipt this Period

5000.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

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 21 / 56

(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)

Ahmed Zayat

Mailing Address 598 Warwick Avenue

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.22808

Amount of Each Receipt this Period

7200.00

check to McCain Victory
08

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

16650.00

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

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

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

A.

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8180.75

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA17.22770

Amount of Each Receipt this Period

16.62

interest income bank acco-
unt

B.

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8342.92

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA17.22771

Amount of Each Receipt this Period

162.17

interest from sweep accou-
nt

SUBTOTAL of Receipts This Page (optional)

178.79

TOTAL This Period (last page this line number only)

178.79

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Constant Contact

Mailing Address 1601 Trapelo Rd
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement
email delivery service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22903

Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Noam Davidovics

Mailing Address 3308 W Strathmore Ave

City Baltimore State MD Zip Code 21215

Purpose of Disbursement
Payroll: IT Support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22837

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Joel Davidson

Mailing Address 25 Ellen Drive

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22836

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

1791.25

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)

Joel Davidson

Mailing Address 25 Ellen Drive

City
Rockaway

State
NJ

Zip Code
07866

Purpose of Disbursement

Payroll: Treasurer

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22841

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1339.96

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Rachel Feldman

Mailing Address 173 Baker Avenue

City
Bergenfield

State
NJ

Zip Code
07621

Purpose of Disbursement

Payroll: Treasure/Memb Dir

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22840

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1636.93

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Rachel Feldman

Mailing Address 173 Baker Avenue

City
Bergenfield

State
NJ

Zip Code
07621

Purpose of Disbursement

Payroll: Treasurer/Memb Dir

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.22851

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1636.93

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Frisch School

Mailing Address 120 W Century Road

City Paramus State NJ Zip Code 07652

Purpose of Disbursement
Rachel Feldman health insurance
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22858
Date of Disbursement

/ /

Amount of Each Disbursement this Period

720.76

B.

Full Name (Last, First, Middle Initial)
Leonor Nunez

Mailing Address 526 Longview Ave

City Cliffside Park State NJ Zip Code 07010

Purpose of Disbursement
Payroll: Bookkeeper
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22852
Date of Disbursement

/ /

Amount of Each Disbursement this Period

143.88

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll service charge
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22838
Date of Disbursement

/ /

Amount of Each Disbursement this Period

127.40

SUBTOTAL of Disbursements This Page (optional)

848.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.22839 Date of Disbursement
Mailing Address 1551 S. Washington Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 8</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Payroll: Davison, Feldman, see memos Candidate Name	Amount of Each Disbursement this Period <div>2976.89</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.22846 Date of Disbursement
Mailing Address 1551 S. Washington Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 1 / 2 0 0 8</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Taxes Candidate Name	Amount of Each Disbursement this Period <div>1076.64</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.22850 Date of Disbursement
Mailing Address 1551 S. Washington Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 8</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Payroll: Feldman, Nunez Candidate Name	Amount of Each Disbursement this Period <div>1780.81</div>
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) ▼

SUBTOTAL of Disbursements This Page (optional)

5834.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.22853 Date of Disbursement
Mailing Address 1551 S. Washington Ave.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City State Zip Code Piscataway NJ 08854 Purpose of Disbursement Payroll taxes Candidate Name	Amount of Each Disbursement this Period <div>503.52</div>
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) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex	Transaction ID: SB21B.22844 Date of Disbursement
Mailing Address 55 Smith St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 8</div> </div>
City State Zip Code Englewood NJ 07631 Purpose of Disbursement postage pd by Rachel Feldman Candidate Name	Amount of Each Disbursement this Period <div>20.66</div>
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) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex	Transaction ID: SB21B.22749 Date of Disbursement
Mailing Address 55 Smith St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 8</div> </div>
City State Zip Code Englewood NJ 07631 Purpose of Disbursement postage purchased 6/6/08 Candidate Name	Amount of Each Disbursement this Period <div>72.12</div>
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) ▼	<div>Category/Type</div>

[MEMO ITEM]

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

503.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Postmaster, Englewood Annex

Mailing Address 55 Smith St

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
postage purchased 6/27/08

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22750

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

53.80

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Postmaster, Englewood Annex

Mailing Address 55 Smith St

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
postage purchased 7/1/08

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22752

Date of Disbursement

07 / 16 / 2008

Amount of Each Disbursement this Period

25.89

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
gas purchased 6/18/08 - see memo

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22925

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

40.05

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
gas purchased 6/28/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22927
Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.68

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Shell

Mailing Address 8 Greenpond Road

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
gas purchased 7/1/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22928
Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.98

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 461-469 West St

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
office supplies bought by Rachel Feldman
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22845
Date of Disbursement

/ /

Amount of Each Disbursement this Period

79.11

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
gas purchased 6/2/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22922
Date of Disbursement

/ /

Amount of Each Disbursement this Period

39.23

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
gas purchased 6/6/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22923
Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.66

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
gas purchased 6/13/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22924
Date of Disbursement

/ /

Amount of Each Disbursement this Period

38.02

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
gas purchased 6/24/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22926
Date of Disbursement

/ /

Amount of Each Disbursement this Period

37.01

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
gas purchased 7/3/08 - see memo
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22930
Date of Disbursement

/ /

Amount of Each Disbursement this Period

24.78

[MEMO ITEM]

C.

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

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
Analysis service charge
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22834
Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.79

SUBTOTAL of Disbursements This Page (optional)

31.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

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

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
credit card payment, see memos
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22847
Date of Disbursement

/ /

Amount of Each Disbursement this Period

234.60

B.

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

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
credit card payment, see memos
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22849
Date of Disbursement

/ /

Amount of Each Disbursement this Period

63.75

C.

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

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
credit card processing fee
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.22775
Date of Disbursement

/ /

Amount of Each Disbursement this Period

21.39

SUBTOTAL of Disbursements This Page (optional)

319.74

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon wireless</p> <p>Mailing Address PO Box 17120</p> <p>City Tucson State AZ Zip Code 85731</p> <p>Purpose of Disbursement phone bill</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>Transaction ID: SB21B.22859</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 9 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>102.22</div> </p> <p>Category/Type <div></div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Walgreens</p> <p>Mailing Address 2151 Lemoine Ave</p> <p>City Fort Lee State NJ Zip Code 07024</p> <p>Purpose of Disbursement photos purchased 7/2/08</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>Transaction ID: SB21B.22753</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>39.79</div> </p> <p>Category/Type <div></div> </p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rachel Wolkowitz</p> <p>Mailing Address 16 Berry Drive</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement Payroll: Office help</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>Transaction ID: SB21B.22848</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 8</div> </div> </p> <p>Amount of Each Disbursement this Period <div>216.05</div> </p> <p>Category/Type <div></div> </p>

SUBTOTAL of Disbursements This Page (optional)

318.27

TOTAL This Period (last page this line number only)

9647.07

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS	Transaction ID: SB23.22865 Date of Disbursement
Mailing Address 21301 POWERLINE ROAD SUITE 204	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 8</div> </div>
City BOCA RATON State FL Zip Code 33433	Amount of Each Disbursement this Period
Purpose of Disbursement check from Cheryl Spielman	<div>100.00</div>
Candidate Name RON KLEIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 22	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22778 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Monique Katz	<div>2300.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22871 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Mordecai Katz	<div>2300.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22873 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Reuven Escott	<div>2300.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22874 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Jonathan Fischer	<div>200.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22876 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Jack Forgash	<div>2000.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
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:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22877 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Jerry Gontownik	<div>2500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22878 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Anne Gontownik	<div>2500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22879 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Jack Gross	<div>1000.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22880 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Lynn Hanfling Candidate Name JOHN S MCCAIN	<div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22881 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Larence Kluger Candidate Name JOHN S MCCAIN	<div>500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22882 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from George Kuhl Candidate Name JOHN S MCCAIN	<div>5000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ►	<div>0.00</div>
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
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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22883 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Martin Schneider	<div>100.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22884 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from James Schwalbe	<div>1000.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22885 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Jamie Schwartz	<div>6500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
NORPAC

07 / 28 / 2008

5000.00

[MEMO ITEM]

07 / 28 / 2008

1000.00

[MEMO ITEM]

07 / 28 / 2008

1000.00

[MEMO ITEM]

FEC Schedule B (Form 3X) (Revised 02/2003)

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22891 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Deena Wruble	<div>5000.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22892 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Ahmed Zayat	<div>7200.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22905 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Jonathan Gold	<div>500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional)

0.00

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:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22906 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement check from Susie Gitler	<div>2500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22893 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Ben Adler	<div>1500.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008	Transaction ID: SB23.22894 Date of Disbursement
Mailing Address 228 S WASHINGTON ST STE 115	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Shira Jacobs	<div>1000.00</div>
Candidate Name JOHN S MCCAIN	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<div>[MEMO ITEM]</div>	
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008 Mailing Address 228 S WASHINGTON ST STE 115	Transaction ID: SB23.22895 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement credit card from Daniel Lewis Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Amount of Each Disbursement this Period <div>1000.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008 Mailing Address 228 S WASHINGTON ST STE 115	Transaction ID: SB23.22896 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement credit card from Howard Baruch Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Amount of Each Disbursement this Period <div>1000.00</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008 Mailing Address 228 S WASHINGTON ST STE 115	Transaction ID: SB23.22898 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement check from Leon Kozak Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Amount of Each Disbursement this Period <div>10000.00</div> [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶	<div>0.00</div> TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
MCCAIN VICTORY 2008

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement
check from Ethel Scher

Candidate Name
JOHN S MCCAIN

Office Sought: ☐ House
☐ Senate
☒ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.22900

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City State Zip Code
LOUISVILLE KY 40201

Purpose of Disbursement
check from Dan Federbush

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.22864

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City State Zip Code
LOUISVILLE KY 40201

Purpose of Disbursement
check from Lawrence Pomeranc

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.22866

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08 Mailing Address PO BOX 1496	Transaction ID: SB23.22867 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 7 / 2 0 0 8</div> </div>
City LOUISVILLE State KY Zip Code 40201 Purpose of Disbursement check from Michael Pomeranc Candidate Name MITCH MCCONNELL Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>1000.00</div> [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08 Mailing Address PO BOX 1496 City LOUISVILLE State KY Zip Code 40201 Purpose of Disbursement check from Jason Muss Candidate Name MITCH MCCONNELL Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22868 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE Mailing Address 310 FIRST STREET SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement check from Mordecai Katz Candidate Name JOHN S MCCAIN Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22872 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>20400.00</div> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22916 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement check from Marshall Cooper	<div> <div>2000.00</div> </div>
Candidate Name JOHN E SUNUNU	<div> <div>011</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22917 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement check from David Schlusell	<div> <div>1000.00</div> </div>
Candidate Name JOHN E SUNUNU	<div> <div>011</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22918 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement check from Roger Sofer	<div> <div>1000.00</div> </div>
Candidate Name JOHN E SUNUNU	<div> <div>011</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22919 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Jack Halpern	<div>500.00</div>
Candidate Name JOHN E SUNUNU	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 00	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22921 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 5 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Keven Lemmer	<div>500.00</div>
Candidate Name JOHN E SUNUNU	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 00	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) TEAM SUNUNU	Transaction ID: SB23.22920 Date of Disbursement
Mailing Address PO BOX 500	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City RYE State NH Zip Code 03870	Amount of Each Disbursement this Period
Purpose of Disbursement credit card from Robert Lebovics	<div>500.00</div>
Candidate Name JOHN E SUNUNU	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 00	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
TEAM SUNUNU

Mailing Address PO BOX 500

City RYE State NH Zip Code 03870

Purpose of Disbursement

Candidate Name
JOHN E SUNUNU

Office Sought: ☐ House
☒ Senate
☐ President

State: NH District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.22854

Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

Image# 29933569355

Form/Schedule: **F3XA**

Transaction ID:

RENT: ammended report includes a \$50 in-kind donation from Dr Ben Chouake. Dr Ben Chouake donates office space to NORPAC every month. It is a small room in the back of his office. 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.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22903**

Paid with Valley National Bank credit card on 7/23/08, check #1093, Dispersement ID 22849

Image# 29933569356

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22841**

Paid by Paychex. Dispersement # 22839

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22840**

Paid by Paychex. Dispersement # 22839

Image# 29933569357

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22851**

Paid by Paychex. Dispersement # 22850

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22852**

Paid by Paychex. Dispersement # 22850

Image# 29933569358

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22749**

Paid with Valley National Bank credit card on 7/16/08, check #1092, Dispersement ID 22847

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22750**

Paid with Valley National Bank credit card on 7/16/08, check #1092, Dispersement ID 22847

Image# 29933569359

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22752**

Paid with Valley National Bank credit card on 7/16/08, check #1092, Dispersement ID 22847

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22925**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Image# 29933569360

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22927**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22928**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Image# 29933569361

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22922**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22923**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Image# 29933569362

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22924**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22926**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Image# 29933569363

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22930**

Reimbursed to Joel Davidson on 7/3/08. Dispersement # 22836

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22753**

Paid with Valley National Bank credit card on 7/16/08, check #1092, Dispersement ID 22847
