

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 16 APR 13 PM 12:16 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 BELL FOR SENATE

ADDRESS (number and street) PO BOX 31 Check if different than previously reported. (ACC) PALISADES PARK NJ 07650

2. FEC IDENTIFICATION NUMBER C00558122 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT NJ 00

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M D D Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M D D Y Y in the State of

5. Covering Period 01 01 2016 through 03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Rich Danker Signature of Treasurer Rich Danker Date 04 07 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

201604130200090353

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From: M M / D D / Y Y 01 / 01 / 2016 To: M M / D D / Y Y 03 / 31 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	3085.00	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	3085.00	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	4470.28	511383.76
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	4470.28	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	98.19	
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) ...	13111.63	

For further information contact:

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

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

201604130200090354

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

BELL FOR SENATE

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	2500.00	418104.93
(ii) Unitemized.....	585.00	83019.95
(iii) TOTAL of contributions from individuals	3085.00	501124.88
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	65225.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3085.00	566349.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate...	0.00	35000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	35000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.08
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	3085.00	601349.96

201604130200090355

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	4470.28	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	1000.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	1000.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	200.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	200.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5470.28	546583.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	2483.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	3085.00
25. SUBTOTAL (add Line 23 and Line 24)...	5568.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	5470.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	98.19

201604130200090356

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

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

FOR LINE NUMBER: PAGE 5 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
J.F. Casey

Mailing Address **9 Canyon Crest Drive**

City **Corona Del Mar** State **CA** Zip Code **92625**

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

Name of Employer **Self** Occupation **Software Salesman**

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2016

Transaction ID : **SA11AI.9077**

Amount of Each Receipt this Period
250.00

Memo Item
2014 General Debt Retirement

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

Mailing Address **10 Geranium Drive**

City **Marlton** State **NJ** Zip Code **06053**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2016

Transaction ID : **SA11AI.9074**

Amount of Each Receipt this Period
1000.00

Memo Item
2014 General Debt Retirement

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

Mailing Address **1101 Arlington Ridge Road
Apt. 610**

City **Arlington** State **VA** Zip Code **22202**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2016

Transaction ID : **SA11AI.9076**

Amount of Each Receipt this Period
250.00

Memo Item
2014 General Debt Retirement

SUBTOTAL of Receipts This Page (optional)..... **1500.00**

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

201604130200090357

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Full Name (Last, First, Middle Initial)
Jack Ekstrom

Mailing Address 1700 Broadway, Ste. 2300

City State Zip Code
Denver CO 80290

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

Name of Employer Occupation
Whiting Petroleum Vice President

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M D D Y Y Y Y
01 28 2016

Transaction ID : SA11AI.9102

Amount of Each Receipt this Period
500.00

Memo Item
2014 General Debt Retirement

700.00

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

Mailing Address 315 E 86th St
Apt 22D East

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014 Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M D D Y Y Y Y
02 12 2016

Transaction ID : SA11AI.9092

Amount of Each Receipt this Period
500.00

Memo Item
2014 General Debt Retirement

500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Election Cycle-to-Date
 Primary General
 Other (specify)

Date of Receipt
M M D D Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	2500.00

201604130200090358

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Adobe		Date of Disbursement M M / D D / Y Y Y 02 / 16 / 2016
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 16.04 <input type="checkbox"/> Memo Item Transaction ID : SB17.9094
City San Jose	State CA	
Purpose of Disbursement Web Subscription	001	Category/ Type
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. Adobe		Date of Disbursement M M / D D / Y Y Y 03 / 16 / 2016
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 16.04 <input type="checkbox"/> Memo Item Transaction ID : SB17.9069
City San Jose	State CA	
Purpose of Disbursement Web Subscription	001	Category/ Type
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) c. Capital One		Date of Disbursement M M / D D / Y Y Y 02 / 01 / 2016
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9091
City Charlotte	State NC	
Purpose of Disbursement Credit Card Payment	001	Category/ Type
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional)	532.08
TOTAL This Period (last page this line number only)	

201604130200090359

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Capital One		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 400.00
City Charlotte	State NC	
Zip Code 28272	Purpose of Disbursement Credit Card Payment	<input type="checkbox"/> Memo Item Transaction ID : SB17.9098
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. Chase		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2016
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 500.00
City Wilmington	State DE	
Zip Code 19850	Purpose of Disbursement Credit Card Payment	<input type="checkbox"/> Memo Item Transaction ID : SB17.9090
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) C. Chase		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2016
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 400.00
City Wilmington	State DE	
Zip Code 19850	Purpose of Disbursement Credit Card Payment	<input type="checkbox"/> Memo Item Transaction ID : SB17.9099
Candidate Name BELL FOR SENATE	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

20160413020090360

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. DBM Desgins, Inc			Date of Disbursement M M / D D / Y Y 02 / 01 / 2016		
Mailing Address 14524 Garfield Ave			Amount of Each Disbursement this Period 1227.26 <input type="checkbox"/> Memo Item Transaction ID : SB17.9087		
City Paramount	State CA	Zip Code 90723			
Purpose of Disbursement Direct Mail		001	Transaction ID : SB17.9087		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

Full Name (Last, First, Middle Initial) B. Driftwood			Date of Disbursement M M / D D / Y Y 02 / 01 / 2016		
Mailing Address 400 H Street NE			Amount of Each Disbursement this Period 80.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.9083		
City Washington	State DC	Zip Code 20002			
Purpose of Disbursement Food and Beverage		001	Transaction ID : SB17.9083		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

Full Name (Last, First, Middle Initial) C. FedEx Office			Date of Disbursement M M / D D / Y Y 01 / 28 / 2016		
Mailing Address 1123 18th St NW			Amount of Each Disbursement this Period 76.27 <input type="checkbox"/> Memo Item Transaction ID : SB17.9072		
City Washington	State DC	Zip Code 20036			
Purpose of Disbursement Shipping		001	Transaction ID : SB17.9072		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

SUBTOTAL of Disbursements This Page (optional).....	1384.03
TOTAL This Period (last page this line number only).....	

201604130200090361

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M D D Y Y 02 01 2016
Mailing Address 3180 18th St STE 100		Amount of Each Disbursement this Period 14.80 <input type="checkbox"/> Memo Item Transaction ID : SB17.9085
City San Francisco	State CA Zip Code 94110	
Purpose of Disbursement Credit Card Fess	001	Transaction ID : SB17.9085
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) B. TCD Compliance		Date of Disbursement M M D D Y Y 02 01 2016
Mailing Address 3365 Cherry Ln Unit D		Amount of Each Disbursement this Period 1140.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9086
City Woodbury	State MN Zip Code 55129	
Purpose of Disbursement Account and Reporting	001	Transaction ID : SB17.9086
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D Y Y 02 12 2016
Mailing Address 360 Broad Ave		Amount of Each Disbursement this Period 51.37 <input type="checkbox"/> Memo Item Transaction ID : SB17.9093
City Princeton	State NJ Zip Code 07605	
Purpose of Disbursement Postage	001	Transaction ID : SB17.9093
Candidate Name BELL FOR SENATE	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 00		

SUBTOTAL of Disbursements This Page (optional).....	1206.17
TOTAL This Period (last page this line number only).....	.

201604130200090362

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 11 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D Y Y 01 / 11 / 2016		
Mailing Address 2213 North Glebe Road			Amount of Each Disbursement this Period 3.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9027		
City Arlington	State VA	Zip Code 22207			
Purpose of Disbursement Bank Fees		001	Transaction ID : SB17.9027		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 00				

Full Name (Last, First, Middle Initial) B. Wells Fargo			Date of Disbursement M M / D D Y Y 01 / 29 / 2016		
Mailing Address 2213 North Glebe Road			Amount of Each Disbursement this Period 14.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9071		
City Arlington	State VA	Zip Code 22207			
Purpose of Disbursement Bank Fees		001	Transaction ID : SB17.9071		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 00				

Full Name (Last, First, Middle Initial) C. Wells Fargo			Date of Disbursement M M / D D Y Y 02 / 29 / 2016		
Mailing Address 2213 North Glebe Road			Amount of Each Disbursement this Period 14.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9097		
City Arlington	State VA	Zip Code 22207			
Purpose of Disbursement Bank Fees		001	Transaction ID : SB17.9097		
Candidate Name BELL FOR SENATE		Category/ Type			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 00				

SUBTOTAL of Disbursements This Page (optional).....	31.00
TOTAL This Period (last page this line number only).....	.

201604130200090363

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 12 OF 15	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M D D / Y Y Y 03 08 2016		
Mailing Address 2213 North Glebe Road			Amount of Each Disbursement this Period 3.00		
City Arlington	State VA	Zip Code 22207	<input type="checkbox"/> Memo Item Transaction ID : SB17.9070		
Purpose of Disbursement Bank Fees		Category/ Type 001			
Candidate Name BELL FOR SENATE		Disbursement For: 2014			
Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NJ	District: 00				

Full Name (Last, First, Middle Initial) B. Wells Fargo			Date of Disbursement M M D D / Y Y Y 03 31 2016		
Mailing Address 2213 North Glebe Road			Amount of Each Disbursement this Period 14.00		
City Arlington	State VA	Zip Code 22207	<input type="checkbox"/> Memo Item Transaction ID : SB17.9068		
Purpose of Disbursement Bank Fees		Category/ Type 001			
Candidate Name BELL FOR SENATE		Disbursement For: 2014			
Office Sought:	<input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: NJ	District: 00				

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

SUBTOTAL of Disbursements This Page (optional).....	17.00
TOTAL This Period (last page this line number only).....	4470.28

201604130200090364

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

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

FOR LINE NUMBER: (check only one)
 17 20a 18 20b 19a 20c 19b 21
 PAGE 13 OF 15

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

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. JEFFREY BELL		Date of Disbursement MM/DD/YYYY 01/01/2016
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 250.00
City LEONIA	State NJ	
Zip Code 07605	Purpose of Disbursement Debt Loan Payment	Memo Item <input type="checkbox"/>
Candidate Name BELL FOR SENATE	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB19A.9101
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. JEFFREY BELL		Date of Disbursement MM/DD/YYYY 02/22/2016
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 750.00
City LEONIA	State NJ	
Zip Code 07605	Purpose of Disbursement Debt Loan Payment	Memo Item <input type="checkbox"/>
Candidate Name BELL FOR SENATE	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB19A.9096
State: NJ	District: 00	

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

201604130200090365

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

Transaction ID : SC/10.8296

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS* Memo Item

JEFFREY BELL

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	1000.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 ^M 16 ^D 2015	12/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional)..... ▶	500.00
TOTALS This Period (last page in this line only) .. ▶	500.00

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

201604130200090366

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

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

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

Outstanding Balance Beginning This Period **9215.79** Transaction ID : **SD10.5743**
 Amount Incurred This Period **0.00** Payment This Period **900.00** Outstanding Balance at Close of This Period **8315.79**

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

Outstanding Balance Beginning This Period **5195.84** Transaction ID : **SD10.8167**
 Amount Incurred This Period **0.00** Payment This Period **900.00** Outstanding Balance at Close of This Period **4295.84**

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

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

1) SUBTOTALS This Period This Page (optional) ...	12611.63
2) TOTALS This Period (last page this line number) ...	12611.63
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	13111.63

201604130200090367

Hand Delivered

201604130200090368

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED _____

Date of Receipt

HAND DELIVERED _____

Date of Receipt

4-13-16

USPS FIRST CLASS MAIL _____

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

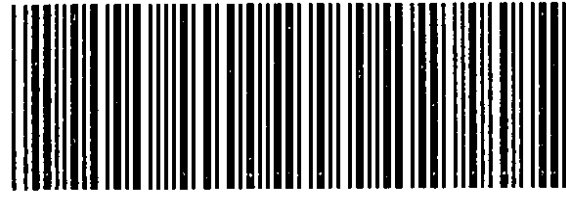
Date of Receipt or Postmark

PREPARER DH

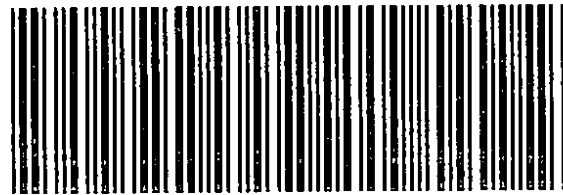
DATE PREPARED 4-13-16

4/04/16

201604130200090369



SEN PATCH



SEN PATCH

201604130200090370