

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5  
Pallone for Congress

ADDRESS (number and street) PO Box 3176  
 Check if different than previously reported. (ACC) Long Branch NJ 07740

2. **FEC IDENTIFICATION NUMBER** C C00226928 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) NJ 06

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 06 / 03 / 2014 in the State of NJ  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on   /   /   in the State of  

5. Covering Period 04 / 01 / 2014 through 05 / 14 / 2014

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 Warren Goode

Signature of Treasurer Warren Goode [Electronically Filed] Date 05 / 22 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Pallone for Congress**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	38075.00	1188713.37
(b) Total Contribution Refunds (from Line 20(d)) .....	500.00	3400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	37575.00	1185313.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	48863.38	660911.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	23.05	44899.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48840.33	616012.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	901860.13	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Pallone for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14550.00	479547.15
(ii) Unitemized.....	25.00	12655.00
(iii) TOTAL of contributions from individuals ▶	14575.00	492202.15
(b) Political Party Committees.....	0.00	11.22
(c) Other Political Committees (such as PACs).....	23500.00	696500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	38075.00	1188713.37
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	625000.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	23.05	44899.51
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	2.91	2547.32
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	38100.96	1861160.20

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48863.38	660911.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	3304453.33
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	3400.00
(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)).....	500.00	3400.00
21. OTHER DISBURSEMENTS .....	25350.00	451470.50
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	74713.38	4420235.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	938472.55
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	38100.96
25. SUBTOTAL (add Line 23 and Line 24).....	976573.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74713.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	901860.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Carl Pope**

Mailing Address 874 Chestnut Street

City San Francisco State CA Zip Code 94133

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

Name of Employer Inside Straight Strategies Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : 11ai-000036723**

Amount of Each Receipt this Period  
500.00

Earmarked Contribution Through ActBlue

**B.** Full Name (Last, First, Middle Initial)  
**Prem Reddy**

Mailing Address 16850 Bear Valley Road

City Victorville State CA Zip Code 92395-5794

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11ai-000036706**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Frank Montecalvo**

Mailing Address 104 Portland Road

City Highlands State NJ Zip Code 07732-1954

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

Name of Employer Bayshore Recycling Corp Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11ai-000036705**

Amount of Each Receipt this Period  
300.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gedalye D. Landau**

Mailing Address 1137 45th Street

City State Zip Code  
Brooklyn NY 11219

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

Name of Employer Occupation  
Icon Interior Design Inc Interior Designer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11ai-000036702**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 2003 Glen Drive

City State Zip Code  
Alexandria VA 22307-1138

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

Name of Employer Occupation  
Thorn Run Partners Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11ai-000036726**

Amount of Each Receipt this Period  
1000.00

Earmarked Contribution Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**David Montero-Rosen**

Mailing Address 251 Crandon Boulevard

City State Zip Code  
Key Biscayne FL 33149

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

Name of Employer Occupation  
Graham & Dodd Fund LLC Portfolio Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11ai-000036725**

Amount of Each Receipt this Period  
250.00

Earmarked Contribution Through ActBlue

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael J. Katin**

Mailing Address 2370 Colonial Boulevard

City State Zip Code  
Fort Myers FL 33907-1412

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

Name of Employer Occupation  
21st Century Oncology Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : 11ai-000036701**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**James E. Eaton**

Mailing Address PO Box 1713

City State Zip Code  
Tallahassee FL 32302-1713

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

Name of Employer Occupation  
21st Century Oncology Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : 11ai-000036700**

Amount of Each Receipt this Period  
1400.00

**C.** Full Name (Last, First, Middle Initial)  
**James E. Eaton**

Mailing Address PO Box 1713

City State Zip Code  
Tallahassee FL 32302-1713

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

Name of Employer Occupation  
21st Century Oncology Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 12 / 2014

**Transaction ID : 11ai-000036699**

Amount of Each Receipt this Period  
2600.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Paul J. Miranti**

Mailing Address 427 Edgemont Drive

City Loch Arbour State NJ Zip Code 07711

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

Name of Employer Rutgers University Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11ai-000036704**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Randal S. Milch**

Mailing Address 110 West 25th Street

City New York State NY Zip Code 10001

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

Name of Employer Verizon Communications Occupation Executive Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11ai-000036703**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael P. Woody**

Mailing Address 621 F Street NE

City Washington State DC Zip Code 20002

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

Name of Employer East End Group Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11ai-000036707**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



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

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

FOR LINE NUMBER: PAGE 9 OF 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Elmendorf**

Mailing Address 900 7th Street NW

City Washington State DC Zip Code 20001

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

Name of Employer Elmendorf Ryan Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11ai-000036730**

Amount of Each Receipt this Period  
 1000.00

Earmarked Contribution Through ActBlue

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

14550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A. ActBlue**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75249.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 20 / 2014

**Transaction ID : 11c-000036720**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

**B. American Society of Health System Pharmacist PAC (ASHP PAC)**

Full Name (Last, First, Middle Initial)  
American Society of Health System Pharmacist PAC (ASHP PAC)

Mailing Address 7272 Wisconsin Avenue

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00245530

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036709**

Amount of Each Receipt this Period  
2000.00

**C. American Clinical Laboratory Association (LABPAC)**

Full Name (Last, First, Middle Initial)  
American Clinical Laboratory Association (LABPAC)

Mailing Address 1100 New York Avenue NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00410084

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036711**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pfizer PAC**

Mailing Address 235 East 42nd Street

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036715**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Pfizer PAC**

Mailing Address 235 East 42nd Street

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036716**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC (AMPAC)**

Mailing Address 25 Massachusetts Avenue NW Suite 6

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036708**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lundbeck LLC Employee PAC**

Mailing Address Four Parkway North

City State Zip Code  
Deerfield IL 60015

FEC ID number of contributing federal political committee. **C** C00491118

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : 11c-000036712**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
75274.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 27 / 2014

**Transaction ID : 11c-000036721**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
76524.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 04 / 2014

**Transaction ID : 11c-000036722**

Amount of Each Receipt this Period  
1250.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Realtors PAC (RPAC)**

Mailing Address 430 North Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036718**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Pepco Holdings Inc PAC (PHI PAC)**

Mailing Address 701 Ninth Street NW

City Washington State DC Zip Code 20068

FEC ID number of contributing federal political committee. **C** C00385849

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036717**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Eli Lilly & Company PAC**

Mailing Address 555 12th Street NW #650

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036710**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MEDNAX Inc Federal PAC**

Mailing Address 1301 Concord Terrace

City Sunrise State FL Zip Code 33323

FEC ID number of contributing federal political committee. **C** C00469205

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036713**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**MEDNAX Inc Federal PAC**

Mailing Address 1301 Concord Terrace

City Sunrise State FL Zip Code 33323

FEC ID number of contributing federal political committee. **C** C00469205

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036714**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Takeda Pharmaceutical America Inc PAC**

Mailing Address 750 9th Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00441733

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 12 / 2014

**Transaction ID : 11c-000036719**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A. ActBlue**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
77524.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11c-000036729**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

**B. Motorola Inc PAC (MotPAC)**

Full Name (Last, First, Middle Initial)  
Motorola Inc PAC (MotPAC)

Mailing Address 1455 Pennsylvania Avenue NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00075341

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11c-000036727**

Amount of Each Receipt this Period  
1000.00

**C. National Limousine Association PAC (NLA PAC)**

Full Name (Last, First, Middle Initial)  
National Limousine Association PAC (NLA PAC)

Mailing Address 49 South Maple Avenue

City State Zip Code  
Marlton NJ 08053

FEC ID number of contributing federal political committee. **C** C00359380

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : 11c-000036728**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

23500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bank of America**

Mailing Address 577 Broadway

City State Zip Code  
Long Branch NJ 07740

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1013.90

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : 15-03-10653-14322**

Amount of Each Receipt this Period  
 2.91

Interest

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2.91

2.91



**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 17 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Payroll Processing	Transaction ID : 17-03-10651-14320
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 1558.78
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Payroll Taxes	Transaction ID : 17-03-10597-14200
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jeffrey C Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 1831 Grampion Place		Amount of Each Disbursement this Period 136.16
City Vienna	State VA	
Zip Code 22182	Purpose of Disbursement Salary	Transaction ID : 17-03-10598-14201
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1777.19
<b>TOTAL</b> This Period (last page this line number only).....	

**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 18 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Janice Fuller</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 7 Carbury Road		Amount of Each Disbursement this Period 3327.16 <b>Transaction ID : 17-03-10599-14202</b>
City Ocean	State NJ	
Zip Code 07712	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Matthew B. Montekio</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 8 Hemlock Court		Amount of Each Disbursement this Period 2447.63 <b>Transaction ID : 17-03-10600-14203</b>
City Hamilton	State NJ	
Zip Code 08619	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Hartford</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO Box 2907		Amount of Each Disbursement this Period 744.00 <b>Transaction ID : 17-03-10618-14227</b>
City Hartford	State CT	
Zip Code 06104	Purpose of Disbursement Insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3327.16
<b>TOTAL</b> This Period (last page this line number only).....	

**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 19 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)  
**A. Ally Financial**

Mailing Address PO Box 78252

City Phoenix State AZ Zip Code 85062-8252

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2014

Amount of Each Disbursement this Period: 566.76

Transaction ID : 17-03-10619-14228

Full Name (Last, First, Middle Initial)  
**B. Horizon Blue Cross/Blue Shield of New Jersey**

Mailing Address PO Box 1738

City Newark State NJ Zip Code 07101

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2014

Amount of Each Disbursement this Period: 1699.04

Transaction ID : 17-03-10620-14229

Full Name (Last, First, Middle Initial)  
**c. De Lage Landen**

Mailing Address PO Box 41602

City Philadelphia State PA Zip Code 19101-1602

Purpose of Disbursement Equipment Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 23 / 2014

Amount of Each Disbursement this Period: 235.70

Transaction ID : 17-03-10621-14230

**SUBTOTAL** of Disbursements This Page (optional) ..... 2501.50

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

**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 20 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Twenty First Century Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 434 New Jersey Avenue SE		Amount of Each Disbursement this Period 2100.00 <b>Transaction ID : 17-03-10622-14231</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Event Expense - Site Rental	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sea Coast Chevrolet</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 3410 Sunset Avenue		Amount of Each Disbursement this Period 1469.73 <b>Transaction ID : 17-03-10623-14232</b>
City Ocean Township State NJ Zip Code 07712	Purpose of Disbursement Travel Expense - Vehicle Maintenance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25 <b>Transaction ID : 17-03-10652-14321</b>
City Fort Washington State PA Zip Code 19034	Purpose of Disbursement Payroll Processing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3651.98
<b>TOTAL</b> This Period (last page this line number only).....	

**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 21 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 1558.73
City Fort Washington	State PA	
Zip Code 19034		
Purpose of Disbursement Payroll Taxes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jeffrey C Carroll</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1831 Grampion Place		Amount of Each Disbursement this Period 136.17
City Vienna	State VA	
Zip Code 22182		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Janice Fuller</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 7 Carbury Road		Amount of Each Disbursement this Period 135.54
City Ocean	State NJ	
Zip Code 07712		
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1830.44
<b>TOTAL</b> This Period (last page this line number only).....	

**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 22 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew B. Montekio</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 8 Hemlock Court		Amount of Each Disbursement this Period 2447.66 <b>Transaction ID : 17-03-10604-14207</b>
City Hamilton	State NJ	
Zip Code 08619	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jodi Woolley</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 4088		Amount of Each Disbursement this Period 2900.00 <b>Transaction ID : 17-03-10626-14235</b>
City Long Branch	State NJ	
Zip Code 07740	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Davey Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 236 Massachusetts Avenue NE Suite 603		Amount of Each Disbursement this Period 3682.50 <b>Transaction ID : 17-03-10627-14236</b>
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Fundraising Consulting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9030.16
<b>TOTAL</b> This Period (last page this line number only).....	

**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 23 OF 43		
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 408		Amount of Each Disbursement this Period 920.90 <b>Transaction ID : 17-03-10628-14237</b>
City Newark State NJ Zip Code 07101-0408	Purpose of Disbursement Telecommunications Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 69		Amount of Each Disbursement this Period 589.22 <b>Transaction ID : 17-03-10629-14238</b>
City Newark State NJ Zip Code 07101-0069	Purpose of Disbursement Internet Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. XenoPsi Media</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 31 Circle Avenue		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : 17-03-10630-14239</b>
City Ridgewood State NJ Zip Code 07450	Purpose of Disbursement Computer Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	920.90
<b>TOTAL</b> This Period (last page this line number only).....	

**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 24 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 30 Ivy Street SE		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : 17-03-10631-14240</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 200 Broadway		Amount of Each Disbursement this Period 154.01 <b>Transaction ID : 17-03-10632-14241</b>
City Long Branch State NJ Zip Code 07740	Purpose of Disbursement Delivery Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Berger Hirschberg Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 1010 Vermon Avenue NW Suite 814		Amount of Each Disbursement this Period 7318.29 <b>Transaction ID : 17-03-10633-14242</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement Fundraising Consulting Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7482.30
<b>TOTAL</b> This Period (last page this line number only).....	



**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 25 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 18049.88
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement See Memo Items	Category/Type	<b>Transaction ID : 17-03-10646-0000</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. New Jersey E-Z Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 375 McCarter Highway		Amount of Each Disbursement this Period 115.00
City Newark	State NJ Zip Code 07714	
Purpose of Disbursement Travel Expense	Category/Type	<b>Transaction ID : 17-03-10646-14263</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steak House</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 101 Constitution Avenue NW		Amount of Each Disbursement this Period 455.00
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Food & Beverage	Category/Type	<b>Transaction ID : 17-03-10646-14275</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	18049.88
<b>TOTAL</b> This Period (last page this line number only).....	

**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 26 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Carmine's</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 425 7th Street NW		Amount of Each Disbursement this Period 2139.18
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14274
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Corner Bakery</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 12700 Park Central Drive		Amount of Each Disbursement this Period 223.00
City Dallas	State TX	
Zip Code 75251	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14273
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hunan Dynasty</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 215 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 357.50
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14272
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 27 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Regency Chesapeake Bay</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 100 Heron Boulevard		Amount of Each Disbursement this Period 258.78
City Cambridge	State MD	
Zip Code 21613	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14268
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Watchung Spring Water</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1900 Swarthmore Avenue		Amount of Each Disbursement this Period 14.48
City Lakewood	State NJ	
Zip Code 08701	Purpose of Disbursement Office Supplies	Transaction ID : 17-03-10646-14266
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Rosa Mexicano Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 575 7th Street at F Street NW		Amount of Each Disbursement this Period 1888.24
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14269
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 28 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 43.00
City South Amboy	State NJ	
Zip Code 08879	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14262
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Watchung Spring Water</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1900 Swarthmore Avenue		Amount of Each Disbursement this Period 23.97
City Lakewood	State NJ	
Zip Code 08701	Purpose of Disbursement Office Supplies	Transaction ID : 17-03-10646-14258
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hunan Dynasty</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 215 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 363.60
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14257
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 29 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bistro Bis Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 15 E Street NW		Amount of Each Disbursement this Period 253.20
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14276
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hilton - Glendale</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 100 West Glenoaks Boulevard		Amount of Each Disbursement this Period 229.07
City Glendale	State CA	
Zip Code 91202	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14307
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 25.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14301
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 30 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 1300 Columbus Avenue		Amount of Each Disbursement this Period 865.84
City San Francisco	State CA	
Zip Code 94133	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14302
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 77.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14277
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Avis Rent A Car</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 9217 Airport Boulevard		Amount of Each Disbursement this Period 234.55
City Los Angeles	State CA	
Zip Code 90045	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14306
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 31 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Blue Mermaid</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 471 Jefferson Street		Amount of Each Disbursement this Period 223.84
City San Francisco	State CA	
Zip Code 94109	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14296
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Buona Sera Ristorante &amp; Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 50 Maple Avenue		Amount of Each Disbursement this Period 5947.70
City Red Bank	State NJ	
Zip Code 07701	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10646-14310
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 45.00
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Membership Fee	Transaction ID : 17-03-10646-14313
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 32 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)  
**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement Service Charge

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 07 / 2014

Amount of Each Disbursement this Period: 337.71

Transaction ID : 17-03-10646-14314

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Hilton - Glendale**

Mailing Address 100 West Glenoaks Boulevard

City Glendale State CA Zip Code 91202

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 07 / 2014

Amount of Each Disbursement this Period: 248.07

Transaction ID : 17-03-10646-14315

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. Southwest Airlines**

Mailing Address PO Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 07 / 2014

Amount of Each Disbursement this Period: 204.00

Transaction ID : 17-03-10646-14286

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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



**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 33 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 75.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14278
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 724.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14279
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 672.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14280
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 34 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 8.99
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14281
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 8.99
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14282
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address PO Box 36611		Amount of Each Disbursement this Period 204.00
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14287
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 35 OF 43	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 7700 Wisconsin Avenue		Amount of Each Disbursement this Period 25.00
City Bethesda	State MD	
Zip Code 20824	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14289
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Avis Rent A Car - San Francisco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 780 McDonnell Road		Amount of Each Disbursement this Period 182.06
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14290
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Westin Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 5400 West Century Boulevard		Amount of Each Disbursement this Period 165.56
City Los Angeles	State CA	
Zip Code 90045	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10646-14293
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 36 OF 43
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Payroll Processing	Transaction ID : 17-03-10654-14323
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 39.50
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10657-14330
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10610-14217
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	141.50
<b>TOTAL</b> This Period (last page this line number only).....	

**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 37 OF 43			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 0.99 <b>Transaction ID : 17-03-10610-14218</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 49.38 <b>Transaction ID : 17-03-10610-14219</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	50.37
<b>TOTAL</b> This Period (last page this line number only).....	48763.38

**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 38 OF 43	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)

**A. High Grade Beverage Distributors**

Mailing Address PO Box 7092

City North Brunswick State NJ Zip Code 08902

Purpose of Disbursement Refund of Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : 20a-03-10647-14316

Category/Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only)..... 500.00

**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 39 OF 43
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Jersey State AFL CIO</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 106 West State Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 21-03-10616-14225</b>
City Trenton	State NJ	
Zip Code 08608	Purpose of Disbursement Donation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Democratic Majority PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO Box 3037		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : 21-03-10617-14226</b>
City Long Branch	State NJ	
Zip Code 07740	Purpose of Disbursement Contribution - Non-Federal	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SILK PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO Box 286		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10635-14244</b>
City Caldwell	State NJ	
Zip Code 07006	Purpose of Disbursement Contribution - Federal	Category/ Type
Candidate Name <b>SILK PAC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 40 OF 43
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bill Foster for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address PO Box 9104		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10649-14318</b>
City Aurora	State IL	
Zip Code 60598	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>G William Foster</b>	Office Sought: <input checked="" type="checkbox"/> House <input 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: IL District: 11	

Full Name (Last, First, Middle Initial) <b>B. Donald Norcross for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address PO Box 160		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10615-14224</b>
City Collingswood	State NJ	
Zip Code 08108	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Donald Norcross</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 01	

Full Name (Last, First, Middle Initial) <b>c. Cannon for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 954		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10645-14256</b>
City Traverse City	State MI	
Zip Code 49685	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Jerry Cannon</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	



**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 41 OF 43
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lara for New Mexico</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 2326		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10644-14255</b>
City Carlsbad	State NM	
Zip Code 88221	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Roxanne Lara</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NM District: 02		

Full Name (Last, First, Middle Initial) <b>B. Ann Callis for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 517 Chapman Street		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10643-14254</b>
City Edwardsville	State IL	
Zip Code 62025	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Ann Callis</b>	Office Sought: <input checked="" type="checkbox"/> House <input 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: IL District: 13		

Full Name (Last, First, Middle Initial) <b>c. Andre Carson for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address PO Box 1863		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10641-14252</b>
City Indianapolis	State IN	
Zip Code 46206	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Andre Carson</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 42 OF 43
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Renteria</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address PO Box 655		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10639-14250</b>
City Sanger	State CA	
Zip Code 93657	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Amanda Renteria</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 21	

Full Name (Last, First, Middle Initial) <b>B. Jeffries for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 380320		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10642-14253</b>
City Brooklyn	State NY	
Zip Code 11238	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Hakeem Jeffries</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 08	

Full Name (Last, First, Middle Initial) <b>c. David Scott for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address PO Box 960821		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10637-14246</b>
City Riverdale	State GA	
Zip Code 30296	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>David Albert Scott</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: GA District: 13	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 43 OF 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Napolitano for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 555 Capital Mall Suite 1425		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10640-14251</b>
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Contribution	
Candidate Name <b>Grace Napolitano</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Conyers for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address PO Box 70980		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10648-14317</b>
City Washington State DC Zip Code 20024	Purpose of Disbursement Contribution	
Candidate Name <b>John Conyers Jr.</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 13	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	25300.00