

SENATE

14 APR 10 PM 2:31

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. 12 FE 4M5

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 131

Check if different than previously reported. (ACC)

PALM SPRINGS PARK NJ 07650

2. FEC IDENTIFICATION NUMBER

000558122

CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

NJ

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 in the State of

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

- General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 01 01 2014 through 03 31 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 Alfred A. Angelo

Signature of Treasurer [Handwritten Signature]

Date April 8 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.

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 02/2003)

14020180383

**SUMMARY PAGE**

of Receipts and Disbursements

Write or Type Committee Name

Bell for Senate

Report Covering the Period: From:

MM ' DD ' YYYY  
01 ' 01 ' 2014

To:

MM ' DD ' YYYY  
03 ' 31 ' 2014

**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)) ...

3580500

3580500

(b) Total Contribution Refunds  
(from Line 20(d)) ..

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) ...

3580500

3580500

7. Net Operating Expenditures

(a) Total Operating Expenditures  
(from Line 17) ..

1786492

1786492

(b) Total Offsets to Operating  
Expenditures (from Line 14) ...

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) ...

1786492

1786492

8. Cash on Hand at Close of  
Reporting Period (from Line 27)...

1754013

9. Debts and Obligations Owed TO  
the Committee (Itemize all on  
Schedule C and/or Schedule D) ..

10. Debts and Obligations Owed BY  
the Committee (Itemize all on  
Schedule C and/or Schedule D) ..

**For further information contact:**

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

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

14020180384

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Bell for Sense

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2014

To:

MM / DD / YYYY  
03 / 31 / 2014

## I. RECEIPTS

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

35,805.00

35,805.00

(ii) Unitemized .....

(iii) TOTAL of contributions from individuals .

35,805.00

35,805.00

(b) Political Party Committees...

(c) Other Political Committees (such as PACs) ..

(d) The Candidate .....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

35,805.00

35,805.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

13. LOANS:

(a) Made or Guaranteed by the Candidate...

(b) All Other Loans...

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.) .....

0.05

0.05

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

35,805.05

35,805.05

14020180385

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	17,864.92	17,864.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs) ..		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS ...		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	17,864.92	17,864.92

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	600
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	35,805.05
25. SUBTOTAL (add Line 23 and Line 24)...	35,805.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	17,864.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	17,940.13

14020180386

**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		OF	
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	11d
				<input type="checkbox"/>	14
				<input type="checkbox"/>	15

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

NAME OF COMMITTEE (In Full) Bell for Senate

Full Name (Last, First, Middle Initial)  
A. Carey, Merrick, M

Mailing Address  
4135 Lorcan Ln.

City Arlington State VA Zip Code 22207

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50000

Date of Receipt  
02 / 26 / 2014

Amount of Each Receipt this Period  
50000

Full Name (Last, First, Middle Initial)  
B. Schubert Francis

Mailing Address  
210 Rue Esperance

City Lincoln State CA Zip Code 95648

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Mission Public Affairs President

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
50000

Date of Receipt  
02 / 28 / 2014

Amount of Each Receipt this Period  
50000

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

Mailing Address  
21313 Denit Estates Dr.

City Brookeville State MD Zip Code 21313

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
02 / 27 / 2014

Amount of Each Receipt this Period  
500

SUBTOTAL of Receipts This Page (optional).....  
100500

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

14020180387

**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		OF	
<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
**Bell for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**Reed, Scott W**

Mailing Address  
**6425 Banders Ave. 3A**

City **Dallas** State **TX** Zip Code **75225**

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

Name of Employer **Chesapeake Enterprises** Occupation **Chairman**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **2,000,000**

Date of Receipt **02 / 26 / 2014**

Amount of Each Receipt this Period **2000.00**

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

Mailing Address  
**4912 42nd Ave.**

City **Hyattsville** State **MD** Zip Code **20781**

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

Name of Employer **U.S. House of Representatives** Occupation **Senior Advisor**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **500,000**

Date of Receipt **02 / 26 / 2014**

Amount of Each Receipt this Period **500.00**

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

Mailing Address  
**410 Constitution Ave. NE**

City **Washington** State **DC** Zip Code **20002**

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

Name of Employer **QEV Analytics** Occupation **President**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **2000,000**

Date of Receipt **02 / 26 / 2014**

Amount of Each Receipt this Period **2000.00**

**SUBTOTAL** of Receipts This Page (optional) **4500.00**

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

14020180388

**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		OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

Full Name (Last, First, Middle Initial)  
*Lukens, Walter*

A. Mailing Address  
*2307 Russell Rd.*

City *Alexandria* State *VA* Zip Code *22301*

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

Name of Employer *The Lukens Company* Occupation *President*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*200000*

Date of Receipt  
MM/DD/YYYY  
*03/04/2014*

Amount of Each Receipt this Period  
*200000*

Full Name (Last, First, Middle Initial)  
*Lehman, Lewis, E*

B. Mailing Address  
*1 Fawcett Pl., Suite 130*

City *Greenwich* State *CT* Zip Code *06830*

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

Name of Employer *L.E. Lehman and Co.* Occupation *Senior Partner*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*260000*

Date of Receipt  
MM/DD/YYYY  
*03/05/2014*

Amount of Each Receipt this Period  
*260000*

Full Name (Last, First, Middle Initial)  
*Lehman Louise, S*

C. Mailing Address  
*1 Fawcett Pl., Suite 130*

City *Greenwich* State *CT* Zip Code *06830*

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

Name of Employer *Five Way Partners* Occupation *Managing Director*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*260000*

Date of Receipt  
MM/DD/YYYY  
*03/05/2014*

Amount of Each Receipt this Period  
*260000*

SUBTOTAL of Receipts This Page (optional).....  
*720000*

TOTAL This Period (last page this line number only).....  
*720000*

14020180389

**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 OF

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

Grant, James

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	3		0	5		2	0	1	4		

Mailing Address

75 Willow St.

City State Zip Code

Brooklyn NY 11201

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

250000

Name of Employer

Grant's Interest Rate Observer

Occupation

Editor

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

250000

Full Name (Last, First, Middle Initial)

~~Regnery~~ Regnery, Alfred

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	3		0	5		2	0	1	4		

Mailing Address

30 September Song Ln.

City State Zip Code

Washington VA 22747

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

10000

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

10000

Full Name (Last, First, Middle Initial)

Johnson, Andrew

Date of Receipt

M	M	M	D	D	D	Y	Y	Y	Y	Y	Y
0	3		0	7		2	0	1	4		

Mailing Address

5851 Merriewood Dr.

City State Zip Code

Oakland CA 94611

FEC ID number of contributing federal political committee.

C

Amount of Each Receipt this Period

50000

Name of Employer

Self-employed

Occupation

Financial analyst

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

50000

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

310000

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

14020180390



**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 OF

<input 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)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

**A.** *Shirley Cress, P*

Mailing Address

*122 S. Patrick St.*

City

*Alexandria*

State

*VA*

Zip Code

*22314*

FEC ID number of contributing federal political committee.

C

Name of Employer

*Shirley Bannister Public Affairs*

Occupation

*Chief Executive Officer*

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*25000*

Date of Receipt

*03 / 10 / 2014*

Amount of Each Receipt this Period

*25000*

**B.** *Luntz, Mitch*

Mailing Address

*103 Rob Roy Ct.*

City

*Franklin*

State

*TN*

Zip Code

*37064*

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*25000*

Date of Receipt

*03 / 10 / 2014*

Amount of Each Receipt this Period

*25000*

**C.** *Shelton, Judy*

Mailing Address

*18253 Moss Neck Manor Rd.*

City

*Fredericksburg*

State

*VA*

Zip Code

*22408*

FEC ID number of contributing federal political committee.

C

Name of Employer

*Self-employed*

Occupation

*Economist*

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*25000*

Date of Receipt

*03 / 12 / 2014*

Amount of Each Receipt this Period

*25000*

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

*52500*

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

*52500*

14020180391

**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	OF
<input 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)  
*Bell for Senate*

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

Mailing Address  
*85 Stuyvesant Ave.*

City *Rye* State *NY* Zip Code *10680*

FEC ID number of contributing federal political committee.  C

Name of Employer *Lincolshire Management* Occupation *President*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 *100000*

Date of Receipt  
M M M ' D D D ' Y Y Y Y Y Y  
*03* ' *13* ' *2014*

Amount of Each Receipt this Period  
*1000.00*

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

Mailing Address  
*36 Twin Lakes Ln.*

City *Riverside* State *CT* Zip Code *06878*

FEC ID number of contributing federal political committee.  C

Name of Employer *Lincolshire Management* Occupation *Chief Executive Officer*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 *100000*

Date of Receipt  
M M M ' D D D ' Y Y Y Y Y Y  
*03* ' *13* ' *2014*

Amount of Each Receipt this Period  
*1000.00*

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

Mailing Address  
*862 Scioto Dr.*

City *Franklin Lakes* State *NJ* Zip Code *07417*

FEC ID number of contributing federal political committee.  C

Name of Employer *McDeemott Will and Emery* Occupation *Attorney*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 *50000*

Date of Receipt  
M M M ' D D D ' Y Y Y Y Y Y  
*03* ' *13* ' *2014*

Amount of Each Receipt this Period  
*5000.00*

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

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

*2500.00*

14020180392

**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		OF				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

Full Name (Last, First, Middle Initial)  
*Barnes, Barbara*

A. Mailing Address  
*305 Charles Alexander Ct.*

City *Alexandria* State *VA* Zip Code *22301*

FEC ID number of contributing federal political committee.  C

Name of Employer *Information requested* Occupation *Information requested*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 *2000000*

Date of Receipt  
 M M /  D D /  Y Y Y Y Y Y  
*03 / 13 / 2013*

Amount of Each Receipt this Period  
 *2000.00*

Full Name (Last, First, Middle Initial)

B. 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

Full Name (Last, First, Middle Initial)

C. 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).....  *2000.00*

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

14020180393

**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 OF	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

A. Full Name (Last, First, Middle Initial)  
*Nethercott, Brian*

Mailing Address  
*63 old Washington Rd.* City *Ridgefield* State *CT* Zip Code *06877*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date *5000*

Date of Receipt  
MM / DD / YYYY  
*03 / 13 / 2014*

Amount of Each Receipt this Period  
*5000*

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

Mailing Address  
*11637 W. Layton Ave.* City *Greenfield* State *WI* Zip Code *53228*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date *2500*

Date of Receipt  
MM / DD / YYYY  
*03 / 13 / 2014*

Amount of Each Receipt this Period  
*2500*

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

Mailing Address  
*250 E 53rd St, Apt. 2702* City *New York* State *NY* Zip Code *10022*

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

Name of Employer Occupation  
*Lincolshire Management* *Managing Director*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date *100000*

Date of Receipt  
MM / DD / YYYY  
*03 / 19 / 2014*

Amount of Each Receipt this Period  
*100000*

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

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

*107500*

14020180394

**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 OF

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A. *Ryskind, Allan, H.*

Mailing Address

*7111 Marlan Dr.*

City State Zip Code

*Alexandria VA 22307*

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

*Retired*

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*100000*

Date of Receipt

*03 / 15 / 2014*

Amount of Each Receipt this Period

*100000*

Full Name (Last, First, Middle Initial)

B. *Gosselin, David, L.*

Mailing Address

*62 Jordan Rd*

City State Zip Code

*Willimantic CT 06226*

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

*Insurance Sales*

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*500000*

Date of Receipt

*03 / 15 / 2014*

Amount of Each Receipt this Period

*500000*

Full Name (Last, First, Middle Initial)

C. *Fidler, Sean and Ana*

Mailing Address

*40 Hslet Ave.*

City State Zip Code

*Princeton NJ 08540*

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

*Financial Analyst*

Receipt For:

Primary  General  
 Other (specify)

Election Cycle-to-Date

*520000*

Date of Receipt

*03 / 24 / 2014*

Amount of Each Receipt this Period

*520000*

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

*670000*

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

*670000*

14020180395



**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 OF				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial)  
*Cullen, William*

Mailing Address  
*202 Louene Ct.*

City *Stroudsburg* State *PA* Zip Code *18301*

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  
MM / DD / YYYY  
*03 / 25 / 2014*

Amount of Each Receipt this Period  
*50.00*

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

Mailing Address  
*24521 Seagate Dr.*

City *Dana Point* State *CA* Zip Code *92625*

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
*Wewor and Lucy, LLP Attorney*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
*03 / 28 / 2014*

Amount of Each Receipt this Period  
*2500.00*

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... *3000.00*

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

14020180397

**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	OF
<input 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)  
*Bell for Senate*

A. Full Name (Last, First, Middle Initial)  
*Anselo, Alfred, A*

Mailing Address  
*340 North Avenue East*

City *Concord* State *NC* Zip Code *07016*

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

Name of Employer *Horizon Partners* Occupation *General Partner*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*2600.00*

Date of Receipt  
MUM 03, DDD 31, YYYY 2014

Amount of Each Receipt this Period  
*2600.00*

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

Mailing Address  
*34 Ferncliff Rd.*

City *Bloomfield* State *NI* Zip Code *07003*

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*1200.00*

Date of Receipt  
MUM 03, DDD 31, YYYY 2014

Amount of Each Receipt this Period  
*1000.00*

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

Mailing Address  
*6217 Lee Hwy.*

City *Arlington* State *VA* Zip Code *22205*

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

Name of Employer *Homemaker* Occupation *Homemaker*

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
*1000.00*

Date of Receipt  
MUM 03, DDD 31, YYYY 2014

Amount of Each Receipt this Period  
*1000.00*

SUBTOTAL of Receipts This Page (optional)..... *3700.00*

TOTAL This Period (last page this line number only)..... *35805.00*

14020180398



**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		OF	
<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 20d	<input type="checkbox"/> 19c 20e	<input type="checkbox"/> 19d 20f

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) *AMTG Solutions*

Mailing Address *9805 Allenford Ct, Unit 4*

City *North Potomac* State *MD* Zip Code *20850*

Purpose of Disbursement *Website design*

Candidate Name *Jeff Bell*

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03 / 03 / 2014*

Amount of Each Disbursement this Period *1,655.00*

**B.**

Full Name (Last, First, Middle Initial) *Pan American Post*

Mailing Address *2255 Blades Rd STE 212E*

City *Boca Raton* State *FL* Zip Code *33431*

Purpose of Disbursement *Translation Services*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03 / 03 / 2014*

Amount of Each Disbursement this Period *6,122.00*

**C.**

Full Name (Last, First, Middle Initial) *Harlande Clarke*

Mailing Address *10931 Laureate Dr.*

City *San Antonio* State *TX* Zip Code *78249*

Purpose of Disbursement *Checkbook*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03 / 04 / 2014*

Amount of Each Disbursement this Period *1,328.60*

**SUBTOTAL** of Disbursements This Page (optional)..... *24,000.60*

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

14020180399

**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 OF

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

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A. *FedEx Office*

Mailing Address

*4501 Fairfax Dr.*

City

*Arlington*

State

*VA*

Zip Code

*22203*

Purpose of Disbursement

*Copying*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*03 / 07 / 2014*

Amount of Each Disbursement this Period

*10.59*

B. *Lopenhaver*

Mailing Address

*1301 Connecticut Ave. NW*

City

*Washington*

State

*DC*

Zip Code

*20036*

Purpose of Disbursement

*Stationery*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*03 / 07 / 2014*

Amount of Each Disbursement this Period

*14.81*

C. *FedEx Office*

Mailing Address

*1123 18<sup>th</sup> St. NW*

City

*Washington*

State

*DC*

Zip Code

*20036*

Purpose of Disbursement

*Copying*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*03 / 07 / 2014*

Amount of Each Disbursement this Period

*29.46*

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

*54.86*

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 OF

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

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A.

*Mackey's Restaurant*

Mailing Address

*1823 L St. NW*

City

*Washington*

State

*DC*

Zip Code

*20036*

Purpose of Disbursement

*Food - campaign meeting*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *10* *2014*

Amount of Each Disbursement this Period

*40.80*

Full Name (Last, First, Middle Initial)

B.

*Crosslist*

Mailing Address

*1381 9th Ave.*

City

*San Francisco*

State

*CA*

Zip Code

*94122*

Purpose of Disbursement

*Job posting*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *10* *2014*

Amount of Each Disbursement this Period

*25.00*

Full Name (Last, First, Middle Initial)

C.

*The Brick Oven*

Mailing Address

*90 South St.*

City

*Murristown*

State

*NJ*

Zip Code

*07960*

Purpose of Disbursement

*Food - campaign meeting*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *10* *2014*

Amount of Each Disbursement this Period

*569.9*

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

*12275*

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

14020180401

**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 OF

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

*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) *Marriott*

Mailing Address *100 Frank W Burr Blvd.*

City *Tenack* State *NJ* Zip Code *07666*

Purpose of Disbursement *Travel*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/10/2014*

Amount of Each Disbursement this Period: *185.21*

**B.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address *Perceptions Design Studio*

*4 Northfield Rd.*

City *Amherst* State *NH* Zip Code *03031*

Purpose of Disbursement *Logo design*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/12/2014*

Amount of Each Disbursement this Period: *480.00*

**C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address *NYC Department of Transportation*

*55 Water St.*

City *New York* State *NY* Zip Code *10041*

Purpose of Disbursement *Parking*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/15/2014*

Amount of Each Disbursement this Period: *9.00*

**SUBTOTAL** of Disbursements This Page (optional)..... *674.21*

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

14020180402

**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 OF

<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement MM DD YYYY  
*03 12 2014*

Mailing Address *CUS*  
*3141 Wilson Blvd.*

City *Arlington* State *VA* Zip Code *22201*

Purpose of Disbursement *Stationery*  Amount of Each Disbursement this Period *635*

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

**B.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement MM DD YYYY  
*03 12 2014*

Mailing Address *Richard Danker*  
*4390 Lorcan Ln Apt. 202*

City *Arlington* State *VA* Zip Code *22207*

Purpose of Disbursement *Services reimbursement*  Amount of Each Disbursement this Period *21844*

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

**C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_  
Date of Disbursement MM DD YYYY  
*03 12 2014*

Mailing Address *Richard Danker*  
*4390 Lorcan Ln. Apt. 202*

City *Arlington* State *VA* Zip Code *22207*

Purpose of Disbursement *Travel reimbursement*  Amount of Each Disbursement this Period *68574*

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional) ..... *141053*

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

14020180403

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

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement:  M  M /  D  D /  Y  Y  Y  Y  
*03 / 13 / 2014*

Mailing Address: *Hampton Inn*

City: *Ridgefield Park* State: *NJ* Zip Code: *07660*

Purpose of Disbursement: *Travel*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: *146.40*

**B.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement:  M  M /  D  D /  Y  Y  Y  Y  
*03 / 13 / 2014*

Mailing Address: *FedEx office*

City: *Arlington* State: *VA* Zip Code: *22203*

Purpose of Disbursement: *Copying*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: *4.18*

**C.**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Date of Disbursement:  M  M /  D  D /  Y  Y  Y  Y  
*03 / 13 / 2014*

Mailing Address: *Fed Ex office*

City: *Arlington* State: *VA* Zip Code: *22203*

Purpose of Disbursement: *Copying*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Amount of Each Disbursement this Period: *6.57*

SUBTOTAL of Disbursements This Page (optional)..... *157.15*

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

14020180404

**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 OF

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

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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A.

Mailing Address: *Amazon.com*

City: *410 Terry Ave N* State: *WA* Zip Code: *98109*

Purpose of Disbursement: *Printer/Scanner equipment*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *13* *2014*

Amount of Each Disbursement this Period

*9,599*

B.

Mailing Address: *Vista Prior*

City: *65 Hayden Ave.* State: *MA* Zip Code: *02421*

Purpose of Disbursement: *Labels*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *14* *2014*

Amount of Each Disbursement this Period

*25.18*

C.

Mailing Address: *Richard Danker*

City: *4390 Lorcom Ln. Apt. 202* State: *VA* Zip Code: *22201*

Purpose of Disbursement: *Salary*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *14* *2014*

Amount of Each Disbursement this Period

*3,016.98*

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

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

*3138.15*

*3138.15*

14020180405

**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 OF

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

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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

A.

AMTG Solutions

Mailing Address

5805 Allenford Ct, Unit 4

City

North Potomac

State

MD

Zip Code

20850

Purpose of Disbursement

Website design

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/17/2014

Amount of Each Disbursement this Period

195.00

B.

Vista Point

Mailing Address

95 Hayden Ave

City

Lexington

State

MA

Zip Code

02421

Purpose of Disbursement

Labels

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/18/2014

Amount of Each Disbursement this Period

25.99

C.

Peter Howe

Mailing Address

38 Parker Rd.

City

Chester

State

NY

Zip Code

07530

Purpose of Disbursement

Field work

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/18/2014

Amount of Each Disbursement this Period

1000.00

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

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

1224.99

14020180406



**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	OF
	<input 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)  
*Bell for Senate*

**A.** Full Name (Last, First, Middle Initial) *Danker, Richard*

Mailing Address *4390 Lorcom Ln., Apt. 202*

City *Arlington* State *VA* Zip Code *22207*

Purpose of Disbursement *Salary*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03/20/2014*

Amount of Each Disbursement this Period *3016.57*

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

Mailing Address *14455 N. Hayden Rd., STE 219*

City *Scottsdale* State *AZ* Zip Code *85260*

Purpose of Disbursement *Domain registration/hosting*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03/20/2014*

Amount of Each Disbursement this Period *8.99*

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

Mailing Address *65 Route 206*

City *Chester* State *NJ* Zip Code *07930*

Purpose of Disbursement *Campaign meeting - food*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement *03/24/2014*

Amount of Each Disbursement this Period *3.25*

**SUBTOTAL** of Disbursements This Page (optional)..... *3029.71*

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

14020180407

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

Mailing Address Amazon.com

M M 0 3	D D 2 4	Y Y Y Y 2 0 1 4
------------	------------	--------------------

City Seattle State WA Zip Code 98109

Amount of Each Disbursement this Period

Purpose of Disbursement Books

1 8 8 5
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address Pordan, Christopher

M M 0 3	D D 2 4	Y Y Y Y 2 0 1 4
------------	------------	--------------------

City Plainboro State NJ Zip Code 08536

Amount of Each Disbursement this Period

Purpose of Disbursement Field work

1 5 0 0 0 0
-------------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address Craigslist

M M 0 3	D D 2 5	Y Y Y Y 2 0 1 4
------------	------------	--------------------

City San Francisco State CA Zip Code 94122

Amount of Each Disbursement this Period

Purpose of Disbursement Job posting

2 5 0 0
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

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

1 5 4 3 8 5
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TOTAL This Period (last page this line number only).....

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14020180408

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

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

FOR LINE NUMBER: (check only one)  
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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

**A.** *Craiglist*

Mailing Address: *1381 9th Ave.*

City: *San Francisco* State: *CA* Zip Code: *94122*

Purpose of Disbursement: *Job posting*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM/DD/YYYY*  
*03/25/2014*

Amount of Each Disbursement this Period

*25.00*

**B.** *Pinnacle List Company*

Mailing Address: *2800 S Shirkinton Rd.*

City: *Arlington* State: *VA* Zip Code: *22206*

Purpose of Disbursement: *Donor list purchase*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM/DD/YYYY*  
*03/25/2014*

Amount of Each Disbursement this Period

*875.00*

**C.** *Wells Fargo*

Mailing Address: *2213 N. Glebe Rd*

City: *Arlington* State: *VA* Zip Code: *22207*

Purpose of Disbursement: *Wire service charge*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM/DD/YYYY*  
*03/26/2014*

Amount of Each Disbursement this Period

*30.00*

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

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

*930.00*

\_\_\_\_\_

14020180409

**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	OF
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NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) The Office Lounge

Mailing Address 820 Main St.

City Toms River State NJ Zip Code 08753

Purpose of Disbursement Campaign meeting - food

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 03 / 26 / 2014

Amount of Each Disbursement this Period: 3219

B. Full Name (Last, First, Middle Initial) Pardon, Christopher

Mailing Address 422 Ravens Crest Dr.

City Plainsboro State NJ Zip Code 08536

Purpose of Disbursement Field work

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 03 / 26 / 2014

Amount of Each Disbursement this Period: 5000

C. Full Name (Last, First, Middle Initial) Congress Hill Hotel

Mailing Address 200 Congress Pl.

City Cape May State NJ Zip Code 08204

Purpose of Disbursement travel

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: 03 / 27 / 2014

Amount of Each Disbursement this Period: 24000

SUBTOTAL of Disbursements This Page (optional)..... 77219

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

14020180410

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) *Chipotle*

Mailing Address *1 Garden State Plaza*

City *Paramus* State *NJ* Zip Code *07652*

Purpose of Disbursement *Food for field staff*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/27/2014*

Amount of Each Disbursement this Period: *9.75*

**B.**

Full Name (Last, First, Middle Initial) *Barban Street Grill*

Mailing Address *1 Garden State Plaza*

City *Paramus* State *NJ* Zip Code *07652*

Purpose of Disbursement *Food for field staff*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/27/2014*

Amount of Each Disbursement this Period: *31.57*

**C.**

Full Name (Last, First, Middle Initial) *CVS*

Mailing Address *400 Broad Ave*

City *Leonia* State *NJ* Zip Code *07605*

Purpose of Disbursement *Stationery*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *03/27/2014*

Amount of Each Disbursement this Period: *12.83*

**SUBTOTAL** of Disbursements This Page (optional) ..... *44.15*

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

14020180411

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A.

*United States Postal Service*

Date of Disbursement

*10/27/2014*

Mailing Address

*398 Broad Ave*

Amount of Each Disbursement this Period

*28.00*

City

*Leone*

State

*NS*

Zip Code

*07605*

Purpose of Disbursement

*Stamps*

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

*Bencivenga, Paul*

Date of Disbursement

*10/27/2014*

Mailing Address

*336 Tesberry Ct.*

Amount of Each Disbursement this Period

*210.00*

City

*Toms River*

State

*NS*

Zip Code

*08753*

Purpose of Disbursement

*Field work*

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

*Intuit*

Date of Disbursement

*10/28/2014*

Mailing Address

*2632 Marine Way*

Amount of Each Disbursement this Period

*327.00*

City

*Mountain View CA*

State

*CA*

Zip Code

*94043*

Purpose of Disbursement

*Software*

Category/  
Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

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

*252.50*

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

*252.50*

14020180412

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

**A.**

Mailing Address: *Hampton Inn*

City: *Ridgefield Park* State: *NJ* Zip Code: *07660*

Purpose of Disbursement: *travel*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *28* *2014*

Amount of Each Disbursement this Period

*151.85*

**B.**

Mailing Address: *FedEx office*

City: *Fort Lee* State: *NJ* Zip Code: *07024*

Purpose of Disbursement: *copying*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *28* *2014*

Amount of Each Disbursement this Period

*638*

**C.**

Mailing Address: *FedEx office*

City: *Fort Lee* State: *NJ* Zip Code: *07024*

Purpose of Disbursement: *shipping*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*MM* *DD* *YYYY*  
*03* *28* *2014*

Amount of Each Disbursement this Period

*32.75*

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

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

*15072*

\_\_\_\_\_

14020180413

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

A.

McDonalds

Mailing Address

1 Garden State Plaza

City

Perkasie

State

PA

Zip Code

07652

Purpose of Disbursement

Food for field staff

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/28/2014

Amount of Each Disbursement this Period

1535

B.

Lincolnshire Management Inc.

Mailing Address

780 Third Ave.

City

New York

State

NY

Zip Code

10017

Purpose of Disbursement

Food, Room rentals

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/28/2014

Amount of Each Disbursement this Period

4,514.00

C.

Intuit

Mailing Address

2632 Marine Way

City

Mountain View

State

CA

Zip Code

94043

Purpose of Disbursement

Software

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

MM/DD/YYYY  
03/31/2014

Amount of Each Disbursement this Period

2357

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

4,907.22

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

14020180414



**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	OF
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NAME OF COMMITTEE (In Full)  
*Bell for Senate*

**A.**

Full Name (Last, First, Middle Initial) *Henderson, Donovan*

Mailing Address *203 Farley Ave.*

City *Farmwood* State *MS* Zip Code *07023*

Purpose of Disbursement *Field work*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *MM* *DD* *YYYY*  
*07* *31* *2014*

Amount of Each Disbursement this Period: *90.00*

**B.**

Full Name (Last, First, Middle Initial) *Theodore, Shawn*

Mailing Address *258 W Englewood Ave.*

City *Englewood* State *MT* Zip Code *07631*

Purpose of Disbursement *Field work*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *MM* *DD* *YYYY*  
*03* *31* *2014*

Amount of Each Disbursement this Period: *422.50*

**C.**

Full Name (Last, First, Middle Initial) *Bencivenga, Paul*

Mailing Address *336 Tesberry Ct.*

City *Toms River* State *MT* Zip Code *08753*

Purpose of Disbursement *Field work*

Candidate Name \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: *MM* *DD* *YYYY*  
*03* *31* *2014*

Amount of Each Disbursement this Period: *184.00*

**SUBTOTAL** of Disbursements This Page (optional)..... *656.50*

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

14020180415

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

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

FOR LINE NUMBER: (check only one)  
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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

**A.** *Marriot*

Mailing Address: *100 Frank W Burr Blvd.*

City: *Teaneck* State: *NJ* Zip Code: *07666*

Purpose of Disbursement: *Computer use*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*03* / *31* / *2014*

Amount of Each Disbursement this Period

*5.00*

**B.** *Papyrus*

Mailing Address: *1 Garden Stk Plz*

City: *Paramus* State: *NJ* Zip Code: *07652*

Purpose of Disbursement: *Pens*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*03* / *31* / *2014*

Amount of Each Disbursement this Period

*1386*

**C.** *Staples*

Mailing Address: *60 Route 17*

City: *Paramus* State: *NJ* Zip Code: *07652*

Purpose of Disbursement: *Printing*

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

*03* / *31* / *2014*

Amount of Each Disbursement this Period

*15.50*

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

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

*3476*

\_\_\_\_\_

14020180416

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

*Bell for Senate*

Full Name (Last, First, Middle Initial)

A.

*Crowne Plaza*

Mailing Address

*401 S Van Brunt St.*

City

*Englewood*

State

*NJ*

Zip Code

*07631*

Purpose of Disbursement

*travel*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

*03 / 31 / 2014*

Amount of Each Disbursement this Period

*346.33*

B.

*Chipotle*

Mailing Address

*1 Garden State Plaza*

City

*Paramus*

State

*NJ*

Zip Code

*07652*

Purpose of Disbursement

*Food for field staff*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

*03 / 31 / 2014*

Amount of Each Disbursement this Period

*16.75*

C.

*Chipotle*

Mailing Address

*1 Garden State Plaza*

City

*Paramus*

State

*NJ*

Zip Code

*07652*

Purpose of Disbursement

*Food for field staff*

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

*03 / 31 / 2014*

Amount of Each Disbursement this Period

*18.50*

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

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

*381.58*

14020180417

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

**A.** Hampton Inn  
Mailing Address 100 Route 46  
City Ridgefield Park State NJ Zip Code 07660  
Purpose of Disbursement Travel  
Candidate Name \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

M  M  D  D  Y  Y  Y  Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

13869

**B.** FedEx office  
Mailing Address 942 Shady Grove Rd.  
City Memphis State TN Zip Code 38120  
Purpose of Disbursement Shipping  
Candidate Name \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

M  M  D  D  Y  Y  Y  Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

4650

**C.** Legal Seafood  
Mailing Address 1 Garden State Plaza  
City Paramus State NJ Zip Code 07652  
Purpose of Disbursement Food for field staff  
Candidate Name \_\_\_\_\_  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement

M  M  D  D  Y  Y  Y  Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

13031

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

31550

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

1786492

14020180418

NANCY ERICKSON  
SECRETARY

DANA K. McCALLUM  
SUPERINTENDENT  
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# United States Senate

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