

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE

16 APR 13 PM 12:17  
Office Use Only

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

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

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

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

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

5. Covering Period M M D D Y Y 01 01 2015 through M M D D Y Y 03 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rich Danker  
Signature of Treasurer Rich Danker Date 04 06 2016

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

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

201604130200090398

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**BELL FOR SENATE**

Report Covering the Period: From: 01 / 01 / 2015 To: 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	5700.00	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	300.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	5400.00	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	9953.59	511383.76
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	9953.59	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	6577.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	22298.63	

**For further information contact:**

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

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

201604130200090399

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name  
**BELL FOR SENATE**

Report Covering the Period: From: <sup>M M</sup> 01 <sup>D D</sup> 01 <sup>Y Y</sup> 2015 To: <sup>M M</sup> 03 <sup>D D</sup> 31 <sup>Y Y</sup> 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	5700.00	418104.93
(ii) Unitemized.....	0.00	83019.95
(ii) TOTAL of contributions from individuals .	5700.00	501124.88
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	65225.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5700.00	566349.88
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>		
	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate...	2500.00	35000.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	2500.00	35000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>		
	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>		
	0.00	0.08
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b>		
	8200.00	601349.96

201604130200090400

**DETAILED SUMMARY PAGE**  
of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	9953.59	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	35000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	300.00	200.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	300.00	200.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	10253.59	546583.76

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	8630.97
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	8200.00
25. SUBTOTAL (add Line 23 and Line 24)...	16830.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	10253.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	6577.38

201604130200090401

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

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

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

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

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Alfred A Angelo</b>			Date of Receipt M M / D D / Y Y Y Y 03 19 / 2015	
Mailing Address 340 North Avenue East			Transaction ID : SA11A1.8197	
City Crawford	State NJ	Zip Code 07016	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item 2014 General Debt Retirement	
Name of Employer Horizon Partners	Occupation General Partner		Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 2700.00				

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Lawrence Whipple</b>			Date of Receipt M M / D D / Y Y Y Y 03 19 / 2015	
Mailing Address 26 Cannon Ct			Transaction ID : SA11A1.8196	
City Basking Ridge	State NJ	Zip Code 07920	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item 2014 General Debt Retirement	
Name of Employer MSW Capital	Occupation Attorney		Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 3000.00				

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

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

201604130200090402

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 14	
	<input type="checkbox"/> 11a 12	<input checked="" 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) <b>JEFFREY BELL</b>		Date of Receipt M M / D D Y Y <b>02 / 24 / 2015</b>
Mailing Address <b>132 CHRISTIE ST</b>		Transaction ID : <b>SA13A.8199</b>
City <b>LEONIA</b>	State <b>NJ</b> Zip Code <b>07605</b>	
FEC ID number of contributing federal political committee. <b>C S8NJ00012</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>Bell for Senate</b>	Occupation <b>Candidate</b>	<input type="checkbox"/> Memo Item <input type="checkbox"/> Candidate Loan
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2500.00</b>

201604130200090403

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14			
	<input checked="" type="checkbox"/> 17 <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**

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		Date of Disbursement MM / DD / YY 03 / 02 / 2015
Mailing Address 11303 Sunset Hills		Amount of Each Disbursement this Period \$ 62.95 <input type="checkbox"/> Memo Item Transaction ID : SB17.8992
City Reston	State VA	
Zip Code 20190	Purpose of Disbursement Credit Card Processing Fees	001 Category/ Type
Candidate Name <b>BELL FOR SENATE</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
State: NJ	District: 00	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 190.95
<b>TOTAL</b> This Period (last page this line number only).....	\$ .00

201604130200090404

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 8 OF 14	
	<input checked="" type="checkbox"/> 17 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) <b>A. Capital One</b>			Date of Disbursement M M D D Y Y Y 03 01 2015		
Mailing Address PO Box 71083			Amount of Each Disbursement this Period - - - - - 1207.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.8222		
City Charlotte	State NC	Zip Code 28272			
Purpose of Disbursement Credit Card Payment		Candidate Name <b>BELL FOR SENATE</b>	001 Category/ Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

Full Name (Last, First, Middle Initial) <b>B. Chase</b>			Date of Disbursement M M D D Y Y Y 03 24 2015		
Mailing Address PO Box 15123			Amount of Each Disbursement this Period - - - - - 1022.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.8223		
City Wilmington	State DE	Zip Code 19850			
Purpose of Disbursement Credit Card Payment		Candidate Name <b>BELL FOR SENATE</b>	001 Category/ Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

Full Name (Last, First, Middle Initial) <b>C. Gia Coluccio</b>			Date of Disbursement M M D D Y Y Y 01 07 2015		
Mailing Address 310 Prospect Ave Apt. 331			Amount of Each Disbursement this Period - - - - - 1800.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.8200		
City Hackensack	State NJ	Zip Code 07601			
Purpose of Disbursement Campaign Consulting		Candidate Name <b>BELL FOR SENATE</b>	001 Category/ Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ District: 00					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....			4029.00		
<b>TOTAL</b> This Period (last page this line number only).....					

201604130200090405



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

Full Name (Last, First, Middle Initial) <b>A. Rich Danker</b>		Date of Disbursement M M D D Y Y 03 30 2015
Mailing Address 4390 Lorcom Ln. Apt 202		Amount of Each Disbursement this Period 333.86 <input type="checkbox"/> Memo Item Transaction ID : SB17.8216
City Arlington	State VA	
Zip Code 22207		Category/ Type 001
Purpose of Disbursement Expense Reimbursement		
Candidate Name <b>BELL FOR SENATE</b>		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 00	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	418.51
<b>TOTAL</b> This Period (last page this line number only).....	

201604130200090406

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

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

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

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	556.18
<b>TOTAL</b> This Period (last page this line number only).....	

201604130200090407

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

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

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

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo</b>		Date of Disbursement M M / D D / Y Y 03 / 31 / 2015
Mailing Address 2213 North Glebe Road		Amount of Each Disbursement this Period - - - - - 143.00
City Arlington	State VA	
Zip Code 22207	Purpose of Disbursement Bank Fees	<input type="checkbox"/> Memo Item Transaction ID : SB17.8987
Candidate Name <b>BELL FOR SENATE</b>	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3880.26
<b>TOTAL</b> This Period (last page this line number only).....	9074.90

201604130200090408

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 14			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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) <b>A. Lawrence Whipple</b>		Date of Disbursement M M / D D Y Y 03 / 31 / 2015
Mailing Address 26 Cannon Ct		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Memo Item Transaction ID : SB20A.8225
City Basking Ridge	State NJ Zip Code 07920	
Purpose of Disbursement Refund of Contribution	Category/Type 001	
Candidate Name <b>BELL FOR SENATE</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
State: NJ District: 00	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	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)	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	Category/Type	<input type="checkbox"/> Memo Item
Candidate Name	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).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	300.00

201604130200090409

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

Transaction ID : SC/10.8199

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

**JEFFREY BELL**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
132 CHRISTIE ST

City State ZIP Code  
LEONIA NJ 07605

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

**TERMS**

Date Incurred: M 02 / D 24 / Y 2015  
Date Due: M M / D D / Y 12/31/2015  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

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

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

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

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

201604130200090410

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
**BELL FOR SENATE**

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

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

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

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

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

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

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

201604130200090411

**Hand Delivered**

201604130200090412

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED \_\_\_\_\_  
Date of Receipt

HAND DELIVERED \_\_\_\_\_  
Date of Receipt **4-13-16**

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

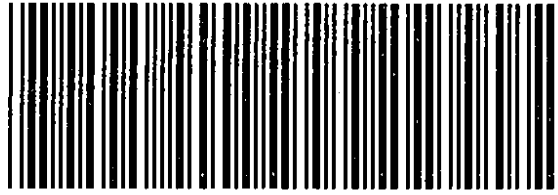
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

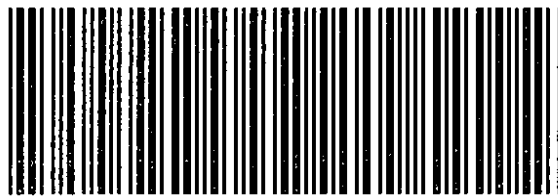
PREPARER **DH** DATE PREPARED **4-13-16**

201604130200090413





SEN PATCH



SEN PATCH

201604130200090414