

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) Riverfront Plaza Station PO Box 200597 Newark NJ 07102

2. FEC IDENTIFICATION NUMBER C00391458 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 16 2008 through 11 24 2008

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

Type or Print Name of Treasurer Peter D. Nichols

Signature of Treasurer Electronically Filed by Peter D. Nichols Date 12 04 2008

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

Office Use Only table with 7 columns and 1 row

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New Jersey First

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		32142.45
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	112903.01									
(c) Total Receipts (from Line 19)	50500.00	282266.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	163403.01	314409.01								
7. Total Disbursements (from Line 31)	38000.00	189006.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	125403.01	125403.01								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
New Jersey First

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	48000.00	181950.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	48000.00	181950.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	2500.00	42800.00
(c) Other Political Committees (such as PACs)	50500.00	224750.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	47516.56
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	10000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	50500.00	282266.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50500.00	282266.56

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1000.00	11756.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1000.00	11756.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	100750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	1000.00	1300.00
29. Other Disbursements.....	6000.00	60200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38000.00	189006.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38000.00	189006.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	50500.00	224750.00
34. Total Contribution Refunds (from Line 28(d))	1000.00	1300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49500.00	223450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1000.00	11756.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1000.00	11756.00

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

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
New Jersey First

A. Full Name (Last, First, Middle Initial)
Wendy W Benchley

Mailing Address 35 Boudinot Street

City State Zip Code
Princeton NJ 08540

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2008
Transaction ID: SA11AI.5401
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Hilltop Associates

Mailing Address PO Box 457

City State Zip Code
Woodbridge NJ 07095

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 12 / 2008
Transaction ID: SA11AI.5405
Amount of Each Receipt this Period 2500.00
Receipt (Partnership)

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

Mailing Address PO Box 457

City State Zip Code
Woodbridge NJ 07095

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

Name of Employer Hilltop Associates Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 12 / 2008
Transaction ID: SA11AI.5405.0
Amount of Each Receipt this Period 2500.00
Memo (Partner Share)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey First

A. Full Name (Last, First, Middle Initial)
Richard B Leventhal

Mailing Address 47 Essex Drive

City State Zip Code
Tenafly NJ 07670

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

Name of Employer Occupation
Fedway Associates President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.5390

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Luke

Mailing Address 30 Longell Drive

City State Zip Code
Wayne NJ 07470

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

Name of Employer Occupation
Grove Associates Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.5392

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ronald O Perelman

Mailing Address 35 East 62nd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
MacAndrews & Forbes Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.5403

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) Arthur F Ryan	Date of Receipt MM / DD / YYYY 11 / 24 / 2008
	Mailing Address 10 Oak Forest Lane	Transaction ID: SA11AI.5411
	City State Zip Code Mendham NJ 07945	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Prudential Financial Inc Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2000.00	

B.	Full Name (Last, First, Middle Initial) Larry A Silverstein	Date of Receipt MM / DD / YYYY 11 / 19 / 2008
	Mailing Address 250 Greenwich Street	Transaction ID: SA11AI.5409
	City State Zip Code New York NY 10007	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Silverstein Properties Occupation Real Estate Developer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 5000.00	

C.	Full Name (Last, First, Middle Initial) Rohinton D Toddywala	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 5 Lavendar Drive	Transaction ID: SA11AI.5397
	City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Nostrum Technologies LLC Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 5000.00	

SUBTOTAL of Receipts This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Jersey First

A. Full Name (Last, First, Middle Initial)
Trafalgar Associates

Mailing Address PO Box 457

City State Zip Code
Woodbridge NJ 07095

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.5407

Amount of Each Receipt this Period
2500.00

Receipt (Partnership)

B. Full Name (Last, First, Middle Initial)
Samuel Halpern

Mailing Address PO Box 457

City State Zip Code
Woodbridge NJ 07095

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Trafalgar Associates Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.5407.0

Amount of Each Receipt this Period
2500.00

Memo (Partner Share)

[MEMO ITEM]

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

Mailing Address 3 Hilltop Court

City State Zip Code
Warren NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.5399

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) 7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey First

A.

Full Name (Last, First, Middle Initial)

Jeffrey Vanderbeek

Mailing Address 3 Hilltop Court

City State Zip Code
Warren NJ 07059

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

Name of Employer Occupation
New Jersey Devils Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.5400

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Zygmunt Wilf

Mailing Address 500 Ashwood Road

City State Zip Code
Springfield NJ 07081

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

Name of Employer Occupation
Garden Homes Real Estate Developer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

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

Transaction ID: SA11AI.5393

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

48000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 17
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) DRIVE (Democrat Republican Independent Voter Education) PAC for IBT	Date of Receipt
	Mailing Address 25 Louisiana Avenue NW	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City State Zip Code Washington DC 20001	Transaction ID: SA11C.5395
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00032979"/>	Amount of Each Receipt this Period <input type="text" value="2500.00"/>
	Name of Employer Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2500.00"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 17

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

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) Common Sense Consulting		Transaction ID: SB21B.5424	
	Mailing Address 222 Stony Brook Road		Date of Disbursement 11 / 02 / 2008	
	City Hopewell	State NJ	Zip Code 08525	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Administrative Services		001	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
	State: District:			

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) Franken Recount Fund	Transaction ID: SB23.5427 Date of Disbursement 11 / 07 / 2008
	Mailing Address 4190 Vinewood Lane	Amount of Each Disbursement this Period 10000.00
	City Minneapolis State MN Zip Code 55442	
	Purpose of Disbursement Contribution - Federal Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: SB23.5429 Date of Disbursement 11 / 12 / 2008
	Mailing Address PO Box 3197	Amount of Each Disbursement this Period 5000.00
	City Little Rock State AR Zip Code 72203	
	Purpose of Disbursement Contribution - Federal Candidate Name Blanche Lincoln	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Martin Victory Committee	Transaction ID: SB23.5425 Date of Disbursement 11 / 06 / 2008
	Mailing Address PO Box 7219	Amount of Each Disbursement this Period 10000.00
	City Atlanta State GA Zip Code 30357	
	Purpose of Disbursement Contribution - Federal Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	25000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 17

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

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) Zeitz for Congress		Transaction ID: SB23.5417	
	Mailing Address PO Box 560		Date of Disbursement 10 / 22 / 2008	
City Bordentown		State NJ	Zip Code 08505	
Purpose of Disbursement Contribution - Federal			Amount of Each Disbursement this Period 5000.00	
Candidate Name Joshua M Zeitz			011 Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 04				

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	30000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 17

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

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NAME OF COMMITTEE (In Full)
New Jersey First

A.	Full Name (Last, First, Middle Initial) James Luke	Transaction ID: SB28A.5434 Date of Disbursement
	Mailing Address 30 Longell Drive	<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/>
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Refund Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Jersey First

<p>A. Full Name (Last, First, Middle Initial) Atlantic County Democratic Committee</p> <p>Mailing Address 1 North New York Road</p> <p>City Galloway State NJ Zip Code 08205</p> <p>Purpose of Disbursement Contribution - Non-Federal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.5420</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Leitner & McHugh</p> <p>Mailing Address 804 Donna Drive</p> <p>City Point Pleasant State NJ Zip Code 08742</p> <p>Purpose of Disbursement Contribution - Non-Federal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.5421</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Roseland Democratic County Committee</p> <p>Mailing Address 4 Cooper Avenue</p> <p>City Roseland State NJ Zip Code 07068</p> <p>Purpose of Disbursement Contribution - Non-Federal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.5432</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6000.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value="6000.00"/></p>

Image# 28934561432

Form/Schedule: SA11AI

Transaction ID: SA11AI.5392

Excess Refunded.
