

**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

NORPAC

ADDRESS (number and street) PO Box 5595

Check if different than previously reported. (ACC) Englewood NJ 07631

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00247403

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on 11 04 2008 in the State of NJ

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 Jeffrey Weinstein

Signature of Treasurer Electronically Filed by Jeffrey Weinstein Date 04 17 2009

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 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORPAC

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		491423.12
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	481995.44									
(c) Total Receipts (from Line 19) .....	11404.51	320076.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	493399.95	811500.11								
7. Total Disbursements (from Line 31) .....	43923.35	362023.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	449476.60	449476.60								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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  
NORPAC

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	10680.00	241401.47
(i) Itemized (use Schedule A) .....	275.00	64396.00
(ii) Unitemized .....	10955.00	305797.47
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	5000.00
(c) Other Political Committees (such as PACs) .....	0.00	10955.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	0.00	310797.47
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
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	44.10
17. Other Federal Receipts (Dividends, Interest, etc.) .....	449.51	9235.42
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)) .....	11404.51	320076.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11404.51	320076.99

**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.....	3148.35	214029.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3148.35	214029.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40775.00	144794.00
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 .....	0.00	3200.00
(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)) .....	0.00	3200.00
29. Other Disbursements.....	0.00	0.00
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))..	43923.35	362023.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43923.35	362023.51

**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) .....	10955.00	310797.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10955.00	307597.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3148.35	214029.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3148.35	214029.51

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

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

FOR LINE NUMBER: PAGE 6 / 32  
(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)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Stephen J. Alterman

Mailing Address 324 Gill Lane  
Apt. 4H

City State Zip Code  
Islen NJ 08830

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

Name of Employer Occupation  
retired retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

**Transaction ID:** SA11AI.23595

Amount of Each Receipt this Period  
100.00

conduit to Andrews for Congress

**[MEMO ITEM]**

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

Mailing Address 5 Cellar Rd.

City State Zip Code  
Edison NJ 08817

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

Name of Employer Occupation  
self dentist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 125.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

**Transaction ID:** SA11AI.23602

Amount of Each Receipt this Period  
200.00

conduit to Andrews for Congress

**[MEMO ITEM]**

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

Mailing Address 45-47 Livingston Ave

City State Zip Code  
Riverdale NY 10463

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

Name of Employer Occupation  
Millburn Corp Investment Advisor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** SA11AI.23673

Amount of Each Receipt this Period  
500.00

membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► **500.00**

**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 / 32

(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)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Self Occupation  
Physician

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1745.17

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.23695

Amount of Each Receipt this Period

200.00

membership

**B.**

Full Name (Last, First, Middle Initial)

Hannah-Jean Brafman

Mailing Address 269 Fountain Rd

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Self Occupation  
Psychologist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

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

Transaction ID: SA11AI.23675

Amount of Each Receipt this Period

1800.00

membership

**C.**

Full Name (Last, First, Middle Initial)

Ben Chouake

Mailing Address 245 Hutchinson Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Self Occupation  
MD

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4565.00

Date of Receipt

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

Transaction ID: SA11AI.24016

Amount of Each Receipt this Period

50.00

In-kind - RENT

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

2050.00

**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 8 / 32  
(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)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Ben Chouake

Mailing Address 245 Hutchinson Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation MD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5265.00

Date of Receipt 11 / 19 / 2008

Transaction ID: SA11AI.23679

Amount of Each Receipt this Period 700.00

EARMARKED TO CHAMBLISS FOR SENATE

**B.**

Full Name (Last, First, Middle Initial)  
Mathi Fuchs

Mailing Address 8 Weber Road

City West Orange State NJ Zip Code 07052

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

Name of Employer Frank Crystal & Co. Occupation Insurance Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 05 / 2008

Transaction ID: SA11AI.23694

Amount of Each Receipt this Period 100.00

membership

**C.**

Full Name (Last, First, Middle Initial)  
Marc Hanfling

Mailing Address 47 Leslie St.

City Edison State NJ Zip Code 08817

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

Name of Employer self Occupation physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 26 / 2008

Transaction ID: SA11AI.23611

Amount of Each Receipt this Period 200.00

conduit to Andrew for Congress

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

**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 9 / 32
	<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)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Allen Kessel	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 8
	Mailing Address 18 Harrison Street	<b>Transaction ID:</b> SA11AI.23600
	City Edison State NJ Zip Code 08817	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	conduit to Andrews for Congress
	Name of Employer Gold Lumber Co., Inc. Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 125.00	<b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) Seymour Kessel	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 8
	Mailing Address 27 Marshall Drive	<b>Transaction ID:</b> SA11AI.23604
	City Edison State NJ Zip Code 08817	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	conduit to Andrews for Congress
	Name of Employer Credit Suisse Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	<b>[MEMO ITEM]</b>

<b>C.</b>	Full Name (Last, First, Middle Initial) Seymour Kessel	Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8
	Mailing Address 27 Marshall Drive	<b>Transaction ID:</b> SA11AI.23674
	City Edison State NJ Zip Code 08817	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	membership
	Name of Employer Credit Suisse Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<b>TOTAL</b> 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 / 32

(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)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
none Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 3950.00

Date of Receipt

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

Transaction ID: SA11AI.23698

Amount of Each Receipt this Period

3000.00

membership

**B.**

Full Name (Last, First, Middle Initial)  
Robert Kreitman

Mailing Address 22 Marshall Drive

City State Zip Code  
Edison NJ 08817

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

Name of Employer Occupation  
Self Lawyer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.23593

Amount of Each Receipt this Period

200.00

conduit to Andrews for Congress

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Steven Leitman

Mailing Address 21 Celler Rd.

City State Zip Code  
Edison NJ 08117

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

Name of Employer Occupation  
Prudential Computer programmer

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.23591

Amount of Each Receipt this Period

50.00

conduit Andrews for Congress

[MEMO ITEM]

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

3000.00

**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 11 / 32  
(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)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Joseph Mark

Mailing Address 166 Norma Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Hambro America Inc. Investment Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2008

**Transaction ID:** SA11AI.23682

Amount of Each Receipt this Period  
2300.00

**EARMARKED TO CHAMBLISS FOR SENATE**

**B.**

Full Name (Last, First, Middle Initial)  
David Moskovic

Mailing Address 22 Brookfall Road

City State Zip Code  
Edison NJ 08810

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

Name of Employer Occupation  
DTCC Systems Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2008

**Transaction ID:** SA11AI.23617

Amount of Each Receipt this Period  
200.00

conduit to Andrews for congress

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Pauline Mykoff

Mailing Address 401 N 5th Ave

City State Zip Code  
Edison NJ 08817

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

Name of Employer Occupation  
East Brunswick Jewish Center Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
MM / DD / YYYY  
10 / 26 / 2008

**Transaction ID:** SA11AI.23615

Amount of Each Receipt this Period  
50.00

conduit to Andrews for Congress

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2300.00

**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 12 / 32

(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)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
David Parker

Mailing Address 12 Charles Lane

City State Zip Code  
Rye Brook NY 10573

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

Name of Employer Occupation  
Kleinberg, Kaplan, Wolff & Coh Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.23669

Amount of Each Receipt this Period

500.00

membership

**B.**

Full Name (Last, First, Middle Initial)  
Drew Parker

Mailing Address 159 Maple St.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Kingsbrook Investments Real Estate

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.23666

Amount of Each Receipt this Period

500.00

membership

**C.**

Full Name (Last, First, Middle Initial)  
Toby Parker

Mailing Address 260 Maple St

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Not practicing Attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.23665

Amount of Each Receipt this Period

250.00

membership

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

1250.00

**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 13 / 32
	<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)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Daniel Perla	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 4530 Livingston Ave	<b>Transaction ID:</b> SA11AI.23672
	City State Zip Code Bronx NY 10471	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	membership
	Name of Employer Occupation Indian Asset Mgmt Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. Barry M. Schanzer	Date of Receipt MM / DD / YYYY 10 / 26 / 2008
	Mailing Address 25 Perry Road	<b>Transaction ID:</b> SA11AI.23606
	City State Zip Code Edison NJ 08817	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	conduit to Andrews for Co- gress
	Name of Employer Occupation self employed physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	<b>[MEMO ITEM]</b>

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Schanzer	Date of Receipt MM / DD / YYYY 10 / 26 / 2008
	Mailing Address 29 Brookfall Road	<b>Transaction ID:</b> SA11AI.23613
	City State Zip Code Edison NJ 08817	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	conduit to Andrews for Co- gress
	Name of Employer Occupation Self Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> 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 14 / 32  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Martin Schneider

Mailing Address 19 Harrison St.

City Edison State NJ Zip Code 08817

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

Name of Employer Millennium Eye Care Occupation MD

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 26 / 2008  
**Transaction ID:** SA11AI.23619  
 Amount of Each Receipt this Period 100.00  
 conduit to Andrews for Congress  
**[MEMO ITEM]**

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

Mailing Address 4 Sandia Court

City Edison State NJ Zip Code 08820

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

Name of Employer Siperstein Fords Paint Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt 10 / 26 / 2008  
**Transaction ID:** SA11AI.23598  
 Amount of Each Receipt this Period 200.00  
 conduit to Andrews for Congress  
**[MEMO ITEM]**

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

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

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

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.18

Date of Receipt 10 / 20 / 2008  
**Transaction ID:** SA11AI.23589  
 Amount of Each Receipt this Period 80.00  
 In-kind - Constant Contact monthly fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.00

**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 15 / 32
	(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)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Date of Receipt
	Mailing Address 11 Anthony Ave.		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Edison	NJ	08820
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11AI.23621
Name of Employer n/a		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1080.18"/>	<input type="text" value="250.00"/>
			conduit to Andrews for Congress <b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) Barry Wolf		Date of Receipt
	Mailing Address 128 N. 8th Ave		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Highland Park	NJ	08904
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11AI.23609
Name of Employer self		Occupation physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	<input type="text" value="200.00"/>
			conduit to Andrews for Congress <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="10680.00"/>

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

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

FOR LINE NUMBER: PAGE 16 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Fidelity Investments  
Mailing Address 396 Route 17 North  
City State Zip Code  
Paramus NJ 07652  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.77  
Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA17.23662  
Amount of Each Receipt this Period: 56.73  
interest income

**B.** Full Name (Last, First, Middle Initial)  
Fidelity Investments  
Mailing Address 396 Route 17 North  
City State Zip Code  
Paramus NJ 07652  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 528.77  
Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA17.23663  
Amount of Each Receipt this Period: 290.00  
dividend

**C.** Full Name (Last, First, Middle Initial)  
Valley National Bank  
Mailing Address 1445 Valley Rd  
City State Zip Code  
Wayne NJ 07470  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 9298.77  
Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA17.23664  
Amount of Each Receipt this Period: 102.78  
interest income

**SUBTOTAL** of Receipts This Page (optional) ..... ► 449.51  
**TOTAL** This Period (last page this line number only) ..... ► 449.51



**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 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)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ben Chouake <hr/> Mailing Address 245 Hutchinson Rd. <hr/> City Englewood State NJ Zip Code 07631 <hr/> Purpose of Disbursement In-kind - RENT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.24017 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 50.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Rachel krich <hr/> Mailing Address PO Box 5595 <hr/> City Englewood State NJ Zip Code 07631 <hr/> Purpose of Disbursement salary/payroll via Paychex Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.23626 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 1186.22
<b>C.</b>	Full Name (Last, First, Middle Initial) Leonor Nunez <hr/> Mailing Address 526 Longview Ave <hr/> City Cliffside Park State NJ Zip Code 07010 <hr/> Purpose of Disbursement salary/payroll via Paychex Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.23650 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8	<b>Amount of Each Disbursement this Period</b> 233.80

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1470.02
<b>TOTAL</b> 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 18 / 32

<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)  
NORPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement payroll service charge from 10/1/08</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.23625</p> <p><b>Date of Disbursement</b> 10 / 16 / 2008</p> <p><b>Amount of Each Disbursement this Period</b> 124.57</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.23627</p> <p><b>Date of Disbursement</b> 10 / 23 / 2008</p> <p><b>Amount of Each Disbursement this Period</b> 425.24</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement payroll tax</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.23652</p> <p><b>Date of Disbursement</b> 10 / 30 / 2008</p> <p><b>Amount of Each Disbursement this Period</b> 15.07</p> <p>001 Category/ Type</p>

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

564.88

**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 19 / 32

<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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.23656
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 10 / 31 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 53.50
	Purpose of Disbursement payroll taxes Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) paypal	Transaction ID: SB21B.23676
	Mailing Address PO Box 45950	Date of Disbursement 11 / 12 / 2008
	City Omaha State NE Zip Code 68145	Amount of Each Disbursement this Period 52.50
	Purpose of Disbursement service charge on donation from Brafman Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Toyota Financial Services	Transaction ID: SB21B.23644
	Mailing Address 1400 Post Road	Date of Disbursement 10 / 28 / 2008
	City Warwick State RI Zip Code 02888	Amount of Each Disbursement this Period 279.92
	Purpose of Disbursement car lease Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>385.92</b>
<b>TOTAL</b> 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)

<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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.23624 Date of Disbursement																			
	Mailing Address 1445 Valley Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	8												
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Bank service charge from 10/1/08	<table border="1"><tr><td>24.32</td></tr></table>	24.32																		
24.32																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.23647 Date of Disbursement																			
	Mailing Address 1445 Valley Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period																			
	Purpose of Disbursement credit card	<table border="1"><tr><td>292.38</td></tr></table>	292.38																		
292.38																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.23655 Date of Disbursement																			
	Mailing Address 1445 Valley Rd	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	1		2	0	0	8												
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period																			
	Purpose of Disbursement service charge	<table border="1"><tr><td>15.00</td></tr></table>	15.00																		
15.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>331.70</td></tr></table>	331.70
331.70		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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 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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.23690
	Mailing Address 1445 Valley Rd	Date of Disbursement MM / DD / YYYY 11 / 14 / 2008
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period 213.63
	Purpose of Disbursement credit card Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Verizon wireless	Transaction ID: SB21B.23645
	Mailing Address PO Box 17120	Date of Disbursement MM / DD / YYYY 10 / 28 / 2008
	City Tucson State AZ Zip Code 85731	Amount of Each Disbursement this Period 102.20
	Purpose of Disbursement cell phone Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jeffrey Weinstein	Transaction ID: SB21B.23590
	Mailing Address 11 Anthony Ave.	Date of Disbursement MM / DD / YYYY 10 / 20 / 2008
	City Edison State NJ Zip Code 08820	Amount of Each Disbursement this Period 80.00
	Purpose of Disbursement In-kind - Constant Contact monthly fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>395.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3148.35</b>

# 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)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Steve Leitman</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23592 <b>Date of Disbursement:</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Robert Kreitman</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23594 <b>Date of Disbursement:</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Stephen Alterman</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23597 <b>Date of Disbursement:</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

**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)

<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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23599 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Barbra Siperstein	<input type="text" value="200.00"/>
	Candidate Name ROBERT E ANDREWS	[MEMO ITEM]
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23601 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Allen Kessel	<input type="text" value="75.00"/>
	Candidate Name ROBERT E ANDREWS	[MEMO ITEM]
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23603 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Harvey Atlas	<input type="text" value="200.00"/>
	Candidate Name ROBERT E ANDREWS	[MEMO ITEM]
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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)

<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)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Dr Barry Schanzer</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23608 <b>Date of Disbursement</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Barry Wolf</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23610 <b>Date of Disbursement</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE</p> <p>Mailing Address 215 FOURTH AVENUE SUITE 200</p> <p>City HADDON HEIGHTS State NJ Zip Code 08035</p> <p>Purpose of Disbursement conduit from Marc Hanfling</p> <p>Candidate Name ROBERT E ANDREWS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.23612 <b>Date of Disbursement</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><b>[MEMO ITEM]</b></p>

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



**SCHEDULE B (FEC Form 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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23614 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Henry Schanzer	<input type="text" value="200.00"/>
	Candidate Name ROBERT E ANDREWS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	[MEMO ITEM]
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23616 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Pauline Mykoff	<input type="text" value="50.00"/>
	Candidate Name ROBERT E ANDREWS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	[MEMO ITEM]
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23620 Date of Disbursement
	Mailing Address 215 FOURTH AVENUE SUITE 200	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City HADDON HEIGHTS State NJ Zip Code 08035	Amount of Each Disbursement this Period
	Purpose of Disbursement conduit from Martin Schneider	<input type="text" value="100.00"/>
	Candidate Name ROBERT E ANDREWS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	[MEMO ITEM]
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
ANDREWS FOR CONGRESS COMMITTEE

Transaction ID: SB23.23622  
Date of Disbursement

Mailing Address 215 FOURTH AVENUE  
SUITE 200

10 / 26 / 2008

City HADDON HEIGHTS State NJ Zip Code 08035

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement  
conduit from Jeffrey Weinstein

011  
Category/  
Type

Candidate Name  
ROBERT E ANDREWS

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: NJ District: 01

B.

Full Name (Last, First, Middle Initial)  
ANDREWS FOR CONGRESS COMMITTEE

Transaction ID: SB23.23605  
Date of Disbursement

Mailing Address 215 FOURTH AVENUE  
SUITE 200

10 / 27 / 2008

City HADDON HEIGHTS State NJ Zip Code 08035

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement  
conduit from Seymour Kessel

011  
Category/  
Type

Candidate Name  
ROBERT E ANDREWS

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: NJ District: 01

C.

Full Name (Last, First, Middle Initial)  
ANDREWS FOR CONGRESS COMMITTEE

Transaction ID: SB23.23653  
Date of Disbursement

Mailing Address 215 FOURTH AVENUE  
SUITE 200

10 / 30 / 2008

City HADDON HEIGHTS State NJ Zip Code 08035

Amount of Each Disbursement this Period

275.00

Purpose of Disbursement  
political contribution

011  
Category/  
Type

Candidate Name  
ROBERT E ANDREWS

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: NJ District: 01

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

275.00

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)

<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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) ANDREWS FOR CONGRESS COMMITTEE	Transaction ID: SB23.23618 Date of Disbursement 11 / 05 / 2008
	Mailing Address 215 FOURTH AVENUE SUITE 200	Amount of Each Disbursement this Period 200.00
	City HADDON HEIGHTS State NJ Zip Code 08035	
	Purpose of Disbursement conduit from David Moskovic	011 Category/ Type
	Candidate Name ROBERT E ANDREWS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) CHAMBLISS FOR SENATE	Transaction ID: SB23.23689 Date of Disbursement 11 / 13 / 2008
	Mailing Address POST OFFICE BOX 12469	Amount of Each Disbursement this Period 5000.00
	City ATLANTA State GA Zip Code 30355	
	Purpose of Disbursement political contribution	011 Category/ Type
	Candidate Name SAXBY CHAMBLISS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff

C.	Full Name (Last, First, Middle Initial) CHAMBLISS FOR SENATE	Transaction ID: SB23.23681 Date of Disbursement 11 / 19 / 2008
	Mailing Address POST OFFICE BOX 12469	Amount of Each Disbursement this Period 700.00
	City ATLANTA State GA Zip Code 30355	
	Purpose of Disbursement EARMARKED FROM BEN CHOUAKE	011 Category/ Type
	Candidate Name SAXBY CHAMBLISS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5700.00
<b>TOTAL</b> 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)

<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)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
CHAMBLISS FOR SENATE

Transaction ID: SB23.23683  
Date of Disbursement

Mailing Address POST OFFICE BOX 12469

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

City ATLANTA State GA Zip Code 30355

Amount of Each Disbursement this Period

Purpose of Disbursement  
EARMARKED FROM JOSEPH MARK

011  
Category/  
Type

2300.00

Candidate Name  
SAXBY CHAMBLISS

Office Sought:  House  
 Senate  
 President  
State: GA District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼  
Runoff

B.

Full Name (Last, First, Middle Initial)  
CITIZENS FOR HARKIN

Transaction ID: SB23.23636  
Date of Disbursement

Mailing Address P O BOX 811

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

City DES MOINES State IA Zip Code 50304

Amount of Each Disbursement this Period

Purpose of Disbursement  
political contribution

011  
Category/  
Type

5000.00

Candidate Name  
THOMAS RICHARD HARKIN

Office Sought:  House  
 Senate  
 President  
State: IA District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
COMMITTEE TO RE-ELECT CONGRESSMAN CHRIS SMITH

Transaction ID: SB23.23654  
Date of Disbursement

Mailing Address PO BOX 3184

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

City HAMILTON State NJ Zip Code 08619

Amount of Each Disbursement this Period

Purpose of Disbursement  
political contribution

011  
Category/  
Type

2000.00

Candidate Name  
CHRISTOPHER H SMITH

Office Sought:  House  
 Senate  
 President  
State: NJ District: 04

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

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

9300.00

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 29 / 32

<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)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF GORDON SMITH</b>	<b>Transaction ID:</b> SB23.23635 Date of Disbursement 10 / 28 / 2008	
	Mailing Address 228 S WASHINGTON STE 115		
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement political contribution	011	Category/Type
	Candidate Name GORDON HAROLD SMITH		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: OR District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF MARY LANDRIEU INC</b>	<b>Transaction ID:</b> SB23.23628 Date of Disbursement 10 / 27 / 2008	
	Mailing Address 650 POYDRAS ST SUITE 1434		
	City NEW ORLEANS State LA Zip Code 70130	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement political contribution	011	Category/Type
	Candidate Name MARY L LANDRIEU		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: LA District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF SESSIONS SENATE COMMITTEE INC</b>	<b>Transaction ID:</b> SB23.23688 Date of Disbursement 11 / 03 / 2008	
	Mailing Address P O BOX 4278		
	City MONTGOMERY State AL Zip Code 36103	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement political contribution	011	Category/Type
	Candidate Name JEFF SESSIONS		
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: AL District: 00	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</b>
<b>TOTAL</b> 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)

<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

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)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF WEINER

Transaction ID: SB23.23648  
Date of Disbursement

Mailing Address P.O. Box 290-346

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

City State Zip Code  
Brooklyn NY 11229

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
political contribution

011  
Category/  
Type

Candidate Name  
ANTHONY D WEINER

Office Sought:  House  
 Senate  
 President  
State: NY District: 09

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
GREENBERG FOR CONGRESS

Transaction ID: SB23.23661  
Date of Disbursement

Mailing Address PO BOX 894

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

City State Zip Code  
MUNDELEIN IL 60060

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
political contribution

011  
Category/  
Type

Candidate Name  
GREENBERG, STEVEN MATHEW

Office Sought:  House  
 Senate  
 President  
State: IL District: 08

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
KIRK FOR CONGRESS

Transaction ID: SB23.23687  
Date of Disbursement

Mailing Address P.O. Box 8

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

City State Zip Code  
Winnetka IL 60093

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
political contribution

011  
Category/  
Type

Candidate Name  
MARK STEVEN KIRK

Office Sought:  House  
 Senate  
 President  
State: IL District: 10

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

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

7000.00
---------

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

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**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)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
LINDSEY GRAHAM FOR SENATE

Mailing Address PO BOX 1801

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement  
political contribution

Candidate Name  
LINDSEY OLIN GRAHAM

Office Sought:  House  
 Senate  
 President  
State: SC District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.23630  
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

2500.00

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

Mailing Address PO BOX 775

City MARMORA State NJ Zip Code 08223

Purpose of Disbursement  
political contribution

Candidate Name  
FRANK A LOBIONDO

Office Sought:  House  
 Senate  
 President  
State: NJ District: 02

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.23649  
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

500.00

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

Mailing Address 885 Annadale Road

City Staten Island State NY Zip Code 10312

Purpose of Disbursement  
political contribution

Candidate Name  
ROBERT A STRANIERE

Office Sought:  House  
 Senate  
 President  
State: NY District: 13

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.23639  
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

500.00

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

3500.00

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

40775.00

Image# 29933569451

Form/Schedule: **F3XA**  
Transaction ID:

Rent. Amended report includes a \$50 in-kind donation from Dr Ben Chouake. Dr Ben Chouake donates office space to NORPAC every month. It is a small room in the back of his office when it is not in use.

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