

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
ALEX LAW FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	20951.64	62241.18
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	20951.64	62241.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15350.59	56208.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15350.59	56208.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13149.22	
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).....	6600.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

ALEX LAW FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7851.00	21883.00
(ii) Unitemized.....	12100.64	38358.18
(iii) TOTAL of contributions from individuals ▶	19951.64	60241.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) The Candidate.....	0.00	1000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	20951.64	62241.18
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	6600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	6600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	20951.64	68841.18

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	15350.59	56208.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	15350.59	56208.89

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7548.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	20951.64
25. SUBTOTAL (add Line 23 and Line 24).....	28499.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15350.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13149.22

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

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

FOR LINE NUMBER: PAGE 5 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
S ALTAN

Mailing Address 1917 ARLINGTON AVE

City NORTH BRUNSWICK State NJ Zip Code 08902

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

Name of Employer N/A Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : SA11Al.7336

Amount of Each Receipt this Period
500.00

Memo Item
CHECK

B. Full Name (Last, First, Middle Initial)
GWEN BAILE

Mailing Address 24 HAMPTON ROAD

City HADDON TOWNSHIP State NJ Zip Code 08108

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
202.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2016

Transaction ID : SA11Al.7644

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9015.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : SA11Al.7644.0

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GWEN BAILE

Mailing Address **24 HAMPTON ROAD**

City **HADDON TOWNSHIP** State **NJ** Zip Code **08108**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **252.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11AI.8771

Amount of Each Receipt this Period
50.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10924.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11AI.8771.0

Amount of Each Receipt this Period
50.00

Memo Item
ACT BLUE

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

Mailing Address **24 HAMPTON ROAD**

City **HADDON TOWNSHIP** State **NJ** Zip Code **08108**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **302.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11AI.8999

Amount of Each Receipt this Period
50.00

Memo Item
ACT BLUE

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11991.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2016

Transaction ID : SA11AI.8999.0

Amount of Each Receipt this Period
 _____ **50.00**

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
GWEN BAILE

Mailing Address **24 HAMPTON ROAD**

City **HADDON TOWNSHIP** State **NJ** Zip Code **08108**

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

Name of Employer Occupation
NOT EMPLOYED NOT EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **327.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : SA11AI.9104

Amount of Each Receipt this Period
 _____ **25.00**

Memo Item
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **12591.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2016

Transaction ID : SA11AI.9104.0

Amount of Each Receipt this Period
 _____ **25.00**

Memo Item
ACT BLUE

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

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

_____ **25.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EILEEN CANNON

Mailing Address 501 GRAND AVE.

City LAUREL SPRINGS State NJ Zip Code 08021

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

Name of Employer THERMO FISHER SCIENTIFIC Occupation TECHNICAL WRITER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 11 / 2016

Transaction ID : SA11AI.8814

Amount of Each Receipt this Period
 100.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11501.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.8814.0

Amount of Each Receipt this Period
 100.00

Memo Item
ACT BLUE

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

Mailing Address 501 GRAND AVE.

City LAUREL SPRINGS State NJ Zip Code 08021

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

Name of Employer THERMO FISHER SCIENTIFIC Occupation TECHNICAL WRITER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : SA11AI.9161

Amount of Each Receipt this Period
 50.00

Memo Item
ACT BLUE

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **13511.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 22 / 2016

Transaction ID : SA11AI.9161.0

Amount of Each Receipt this Period
 _____ **50.00**

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
MICHAEL ESTERSON

Mailing Address **25 LINDES FARNE AVE.**

City **WESTMONT** State **NJ** Zip Code **08108**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2016

Transaction ID : SA11AI.7490

Amount of Each Receipt this Period
 _____ **100.00**

Memo Item
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **8990.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 10 / 2016

Transaction ID : SA11AI.7490.0

Amount of Each Receipt this Period
 _____ **100.00**

Memo Item
ACT BLUE

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

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

_____ **100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL ESTERSON

Mailing Address 25 LINDES FARNE AVE.

City WESTMONT State NJ Zip Code 08108

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

Name of Employer N/A Occupation N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2016

Transaction ID : SA11AI.8649

Amount of Each Receipt this Period
 100.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10874.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2016

Transaction ID : SA11AI.8649.0

Amount of Each Receipt this Period
 100.00

Memo Item
ACT BLUE

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

Mailing Address 105 WEBSTER AVENUE

City STRATFORD State NJ Zip Code 08084

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

Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 23 / 2016

Transaction ID : SA11AI.8134

Amount of Each Receipt this Period
 25.00

Memo Item
ACT BLUE

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10584.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.8134.0

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
JOHN GILLIGAN

Mailing Address 105 WEBSTER AVENUE

City State Zip Code
STRATFORD NJ 08084

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

Name of Employer Occupation
NOT EMPLOYED NOT EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.9013

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11941.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.9013.0

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

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

20.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEOFFREY HULING

Mailing Address 201 FERN AVENUE

City: HADDON TOWNSHIP State: NJ Zip Code: 08108

FEC ID number of contributing federal political committee: C

Name of Employer: MITTS LAW, LLC Occupation: ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 290.00

Date of Receipt: 04 / 14 / 2016

Transaction ID : SA11Al.7687

Amount of Each Receipt this Period: 50.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City: SOMERVILLE State: MA Zip Code: 02144

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 9225.00

Date of Receipt: 04 / 17 / 2016

Transaction ID : SA11Al.7687.0

Amount of Each Receipt this Period: 50.00

Memo Item
ACT BLUE

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

Mailing Address 201 FERN AVENUE

City: HADDON TOWNSHIP State: NJ Zip Code: 08108

FEC ID number of contributing federal political committee: C

Name of Employer: MITTS LAW, LLC Occupation: ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 390.00

Date of Receipt: 05 / 10 / 2016

Transaction ID : SA11Al.8757

Amount of Each Receipt this Period: 100.00

Memo Item
ACT BLUE

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 13 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11051.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11Al.8757.0

Amount of Each Receipt this Period
100.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
GEOFFREY HULING

Mailing Address **201 FERN AVENUE**

City **HADDON TOWNSHIP** State **NJ** Zip Code **08108**

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

Name of Employer Occupation
MITTS LAW, LLC **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **410.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : SA11Al.8866

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11546.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11Al.8866.0

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

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

20.00

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

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

FOR LINE NUMBER: PAGE 14 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS KNOCHE

Mailing Address **88 VIRGINIA AVE.**

City **COLLINGSWOOD** State **NJ** Zip Code **08108**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11AI.8780

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11301.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11AI.8780.0

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

Mailing Address **88 VIRGINIA AVE.**

City **COLLINGSWOOD** State **NJ** Zip Code **08108**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 14 / 2016

Transaction ID : SA11AI.8934

Amount of Each Receipt this Period
100.00

Memo Item
ACT BLUE

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 15 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11646.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 15 / 2016

Transaction ID : SA11AI.8934.0

Amount of Each Receipt this Period
100.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
KAREN LAMBERT

Mailing Address **115 NORTH ROAD**

City **PRINCETON** State **NJ** Zip Code **08540**

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Transaction ID : SA11AI.7340

Amount of Each Receipt this Period
250.00

Memo Item
CHECK

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

Mailing Address **4195 COLONIAL CT**

City **HOWELL** State **MI** Zip Code **48843**

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

Name of Employer Occupation
WORKDAY SOFTWARE ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : SA11AI.9098

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13461.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.9098.0

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
NANCY LAW

Mailing Address 204 HILLCREST AVENUE APARTMENT A

City COLLINGSWOOD State NJ Zip Code 08108

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : SA11AI.8459

Amount of Each Receipt this Period
300.00

Memo Item
CHECK

C. Full Name (Last, First, Middle Initial)
MARY ELLEN MARINO

Mailing Address 9 HORNOR LN

City PRINCETON State NJ Zip Code 08540

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

Name of Employer Occupation
ARC MERCER MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
485.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : SA11AI.8215

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10704.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2016

Transaction ID : SA11A1.8215.0

Amount of Each Receipt this Period
 _____ **25.00**

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
GEORGE MASSEY

Mailing Address **16 HERBERT DRIVE**

City **EAST BRUNSWICK** State **NJ** Zip Code **08816**

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

Name of Employer Occupation
NONE SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 13 / 2016

Transaction ID : SA11A1.7660

Amount of Each Receipt this Period
 _____ **100.00**

Memo Item
ACT BLUE

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

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **9165.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 17 / 2016

Transaction ID : SA11A1.7660.0

Amount of Each Receipt this Period
 _____ **100.00**

Memo Item
ACT BLUE

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

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

_____ **100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE MASSEY

Mailing Address 16 HERBERT DRIVE

City EAST BRUNSWICK State NJ Zip Code 08816

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

Name of Employer NONE Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **362.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : SA11AI.8073

Amount of Each Receipt this Period
 42.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10559.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.8073.0

Amount of Each Receipt this Period
 42.00

Memo Item
ACT BLUE

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

Mailing Address 16 HERBERT DRIVE

City EAST BRUNSWICK State NJ Zip Code 08816

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

Name of Employer NONE Occupation SELF-EMPLOYED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **387.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.8158

Amount of Each Receipt this Period
 25.00

Memo Item
ACT BLUE

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

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

67.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10629.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2016

Transaction ID : SA11AI.8158.0

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
MARGHI MCKEON

Mailing Address 876 28TH AVE.

City BARRONETT State WI Zip Code 54813

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

Name of Employer Occupation
LAB SAFETY CORPORATION CO-OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : SA11AI.7797

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.7797.0

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GUY MICHAEL

Mailing Address 17 WEST HIGH RIDGE ROAD

City State Zip Code
CHERRY HILL NJ 08003

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

Name of Employer Occupation
MICHAEL & CARROLL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
217.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Transaction ID : SA11Al.7853

Amount of Each Receipt this Period
42.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9517.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2016

Transaction ID : SA11Al.7853.0

Amount of Each Receipt this Period
42.00

Memo Item
ACT BLUE

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

Mailing Address 17 WEST HIGH RIDGE ROAD

City State Zip Code
CHERRY HILL NJ 08003

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

Name of Employer Occupation
MICHAEL & CARROLL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
242.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : SA11Al.8844

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

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

67.00

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

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

FOR LINE NUMBER: PAGE 21 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11526.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11A1.8844.0

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
GUY MICHAEL

Mailing Address 17 WEST HIGH RIDGE ROAD

City CHERRY HILL State NJ Zip Code 08003

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

Name of Employer Occupation
MICHAEL & CARROLL ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
267.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11A1.9101

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12566.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11A1.9101.0

Amount of Each Receipt this Period
25.00

Memo Item
ACT BLUE

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

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

25.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAJEAN MORGAN

Mailing Address 201 S 18TH

City PHILADELPHIA State PA Zip Code 19103

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

Name of Employer DUJOUR Occupation SALES AND MARKETING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.8971

Amount of Each Receipt this Period
 25.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **11921.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.8971.0

Amount of Each Receipt this Period
 25.00

Memo Item
ACT BLUE

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

Mailing Address 7 JULIA COURT

City MOORESTOWN State NJ Zip Code 08057

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

Name of Employer COOPER UNIVERSITY HOSPITAL Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2016

Transaction ID : SA11AI.8940

Amount of Each Receipt this Period
 250.00

Memo Item
ACT BLUE

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
11896.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.8940.0

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
JOHN NOSEK

Mailing Address 215 REDMAN AVENUE

City HADDONFIELD State NJ Zip Code 08033

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

Name of Employer Occupation
TEMPLE UNIVERSITY PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.8978

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12241.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.8978.0

Amount of Each Receipt this Period
250.00

Memo Item
ACT BLUE

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 24 OF 49
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOBY RYAN

Mailing Address 117 WESTWOOD CIRCLE

City State Zip Code
CHARLOTTESVILLE VA 22903

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

Name of Employer Occupation
UNIVERSITY OF VIRGINIA LAW SCH DEVELOPMENT OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.9097

Amount of Each Receipt this Period
100.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12711.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.9097.0

Amount of Each Receipt this Period
100.00

Memo Item
ACT BLUE

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

Mailing Address 340 KINGS HWY W

City State Zip Code
HADDONFIELD NJ 08033

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

Name of Employer Occupation
SANDMEYER STEEL COMPANY CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.9087

Amount of Each Receipt this Period
500.00

Memo Item
ACT BLUE

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
13211.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.9087.0

Amount of Each Receipt this Period
500.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ABBY SCHMIDT

Mailing Address 105 HUNTINGTON DRIVE

City State Zip Code
HAMMONTON NJ 08037

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

Name of Employer Occupation
WALTER SIGNS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
304.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016

Transaction ID : SA11AI.7702

Amount of Each Receipt this Period
10.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
9175.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2016

Transaction ID : SA11AI.7702.0

Amount of Each Receipt this Period
10.00

Memo Item
ACT BLUE

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

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

10.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABBY SCHMIDT

Mailing Address 105 HUNTINGTON DRIVE

City State Zip Code
HAMMONTON NJ 08037

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

Name of Employer Occupation
WALTER SIGNS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
324.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 04 / 2016

Transaction ID : SA11AI.8525

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10774.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 08 / 2016

Transaction ID : SA11AI.8525.0

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

Mailing Address 105 HUNTINGTON DRIVE

City State Zip Code
HAMMONTON NJ 08037

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

Name of Employer Occupation
WALTER SIGNS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
351.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11AI.8753

Amount of Each Receipt this Period
27.00

Memo Item
ACT BLUE

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

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

47.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10951.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 15 / 2016

Transaction ID : SA11AI.8753.0

Amount of Each Receipt this Period
27.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ABBY SCHMIDT

Mailing Address 105 HUNTINGTON DRIVE

City HAMMONTON State NJ Zip Code 08037

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

Name of Employer Occupation
WALTER SIGNS OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
371.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.9086

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
12611.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2016

Transaction ID : SA11AI.9086.0

Amount of Each Receipt this Period
20.00

Memo Item
ACT BLUE

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

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

20.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEAL STENDER

Mailing Address **2 SHA PA VILLAGE**

City **LAM TSUEN TAI PO N.T.** State **ZZ** Zip Code **00000**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **871.67**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 30 / 2016

Transaction ID : SA11AI.8268

Amount of Each Receipt this Period
 _____ **50.00**

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address **366 SUMMER STREET**

City **SOMERVILLE** State **MA** Zip Code **02144**

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

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **10754.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2016

Transaction ID : SA11AI.8268.0

Amount of Each Receipt this Period
 _____ **50.00**

Memo Item
ACT BLUE

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

Mailing Address **47 HULFISH ST**

City **PRINCETON** State **NJ** Zip Code **08542**

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

Name of Employer **NOT EMPLOYED** Occupation **NOT EMPLOYED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.8047

Amount of Each Receipt this Period
 _____ **1000.00**

Memo Item
ACT BLUE

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

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

_____ **1050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 49
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10517.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2016

Transaction ID : SA11AI.8047.0

Amount of Each Receipt this Period
1000.00

Memo Item
ACT BLUE

B. Full Name (Last, First, Middle Initial)
SETH YOUNG

Mailing Address 1 DEERFIELD DR.

City VOORHEES State NJ Zip Code 08043

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

Name of Employer Occupation
AMERINOX OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : SA11AI.8453

Amount of Each Receipt this Period
1350.00

Memo Item
CHECK

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

Mailing Address 1 DEERFIELD DR.

City VOORHEES State NJ Zip Code 08043

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

Name of Employer Occupation
N/A N/A

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2016

Transaction ID : SA11AI.8455

Amount of Each Receipt this Period
1350.00

Memo Item
CHECK

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

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

2700.00

7851.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 49
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE FRIENDS OF FRANK MINOR

Mailing Address 210 ABBEY LANE

City State Zip Code
SWEDESBORO NJ 08085

FEC ID number of contributing federal political committee. **C** C00563239

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : SA11C.8697

Amount of Each Receipt this Period
1000.00

Memo Item
CHECK

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. ACT BLUE

Mailing Address 366 SUMMER STREET

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement FUNDRAISING FEES Category/Type 003

Candidate Name ALEX LAW FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: NJ District: 01

Date of Disbursement 05 / 18 / 2016

Amount of Each Disbursement this Period 626.55

Memo Item

Transaction ID : SB17.9393

Full Name (Last, First, Middle Initial)
B. ALAN H. SCHORR & ASSOCIATES

Mailing Address 5 SPLIT ROCK DR

City CHERRY HILL State NJ Zip Code 08003

Purpose of Disbursement LEGAL FEES #9339 Category/Type 001

Candidate Name ALEX LAW FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: NJ District: 01

Date of Disbursement 04 / 20 / 2016

Amount of Each Disbursement this Period 103.14

Memo Item

Transaction ID : SB17.9355

Full Name (Last, First, Middle Initial)
C. ALAN H. SCHORR & ASSOCIATES

Mailing Address 5 SPLIT ROCK DR

City CHERRY HILL State NJ Zip Code 08003

Purpose of Disbursement LEGAL FEES #9339 Category/Type 001

Candidate Name ALEX LAW FOR CONGRESS

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: NJ District: 01

Date of Disbursement 05 / 17 / 2016

Amount of Each Disbursement this Period 74.85

Memo Item

Transaction ID : SB17.9390

SUBTOTAL of Disbursements This Page (optional) 804.54

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FACEBOOK		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 1 HACKER WAY		Amount of Each Disbursement this Period 0.00 <input type="checkbox"/> Memo Item Transaction ID : SB17.9313
City MENLO PARK	State CA	
Zip Code 94025	Purpose of Disbursement ADVERTISEMENTS	Category/ Type 004
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 24.96	State: NJ District: 01	

Full Name (Last, First, Middle Initial) B. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 415.80 <input type="checkbox"/> Memo Item Transaction ID : SB17.9314
City PHILADELPHIA	State PA	
Zip Code 19134	Purpose of Disbursement PRINTING	Category/ Type 006
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 01	

Full Name (Last, First, Middle Initial) C. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 329.40 <input type="checkbox"/> Memo Item Transaction ID : SB17.9315
City PHILADELPHIA	State PA	
Zip Code 19134	Purpose of Disbursement PRINTING	Category/ Type 006
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 01	

SUBTOTAL of Disbursements This Page (optional).....	745.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 480.60 <input type="checkbox"/> Memo Item Transaction ID : SB17.9322
City PHILADELPHIA State PA Zip Code 19134	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

Full Name (Last, First, Middle Initial) B. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 975.24 <input type="checkbox"/> Memo Item Transaction ID : SB17.9340
City PHILADELPHIA State PA Zip Code 19134	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

Full Name (Last, First, Middle Initial) C. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 482.76 <input type="checkbox"/> Memo Item Transaction ID : SB17.9342
City PHILADELPHIA State PA Zip Code 19134	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1938.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 264.60 <input type="checkbox"/> Memo Item
City PHILADELPHIA State PA Zip Code 19134	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9360
State: NJ District: 01		

Full Name (Last, First, Middle Initial) B. FIREBALL PRINTING		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address 3237 AMBER ST, BOX 3 FLOOR 5		Amount of Each Disbursement this Period 2288.52 <input type="checkbox"/> Memo Item
City PHILADELPHIA State PA Zip Code 19134	Purpose of Disbursement PRINTING 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9367
State: NJ District: 01		

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 1600 AMPHITHEATRE PAPERWAY		Amount of Each Disbursement this Period 49.02 <input type="checkbox"/> Memo Item
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING 004 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9319
State: NJ District: 01		

SUBTOTAL of Disbursements This Page (optional).....	2602.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 1600 AMPHITHEATRE PAPERWAY		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement ADVERTISING 004 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9374
State: NJ District: 01		

Full Name (Last, First, Middle Initial) B. ALICE LAHODA		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 75.00 <input type="checkbox"/> Memo Item
City COLLINGSWOOD State NJ Zip Code 08108	Purpose of Disbursement FUNDRAISING EXPENSE 003 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9316
State: NJ District: 01		

Full Name (Last, First, Middle Initial) C. ALICE LAHODA		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 50.47 <input type="checkbox"/> Memo Item
City COLLINGSWOOD State NJ Zip Code 08108	Purpose of Disbursement STAFF TRANSPORTATION 002 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9318
State: NJ District: 01		

SUBTOTAL of Disbursements This Page (optional).....	175.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALICE LAHODA		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item
City COLLINGSWOOD	State NJ	
Zip Code 08108	Purpose of Disbursement FUNDRAISING EXPENSE	Transaction ID : SB17.9331
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. ALICE LAHODA		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 48.12 <input type="checkbox"/> Memo Item
City COLLINGSWOOD	State NJ	
Zip Code 08108	Purpose of Disbursement TRAVEL EXPENSES	Transaction ID : SB17.9344
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) C. ALICE LAHODA		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address N/A		Amount of Each Disbursement this Period 93.60 <input type="checkbox"/> Memo Item
City COLLINGSWOOD	State NJ	
Zip Code 08108	Purpose of Disbursement STAFF TRANSPORTATION	Transaction ID : SB17.9386
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	191.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 49			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LANGDAN PHOTOGRAPHY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Memo Item
City HADDON TOWNSHIP	State NJ	
Zip Code 08107	Purpose of Disbursement PHOTOGRAPHY	Transaction ID : SB17.9311
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. CHRIS NAPPI		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 1720 N. 5TH ST, 404		Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Memo Item
City PHILADELPHIA	State PA	
Zip Code 19122	Purpose of Disbursement GRAPHIC DEESIGN	Transaction ID : SB17.9336
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) C. CHRIS NAPPI		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 1720 N. 5TH ST, 404		Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Memo Item
City PHILADELPHIA	State PA	
Zip Code 19122	Purpose of Disbursement GRAPHIC DEESIGN	Transaction ID : SB17.9375
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2016	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RUBA		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 770.00
City HADDON TOWNSHIP	State NJ Zip Code 08107	
Purpose of Disbursement RENT	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9325
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) B. SERVE IT UP ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016
Mailing Address PO BOX 704		Amount of Each Disbursement this Period 375.00
City MULLICA HILL	State NJ Zip Code 08062	
Purpose of Disbursement ADVERTISEMENTS	Category/Type 004	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9356
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) C. SERVE IT UP ADVERTISING		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address PO BOX 704		Amount of Each Disbursement this Period 350.00
City MULLICA HILL	State NJ Zip Code 08062	
Purpose of Disbursement ADVERTISEMENTS	Category/Type 004	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9365
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

SUBTOTAL of Disbursements This Page (optional).....	1495.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SOHA ARTS BUILDING		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 1001 WHITE HORSE PIKE		Amount of Each Disbursement this Period 750.00
City HADDON TOWNSHIP	State NJ Zip Code 08107	
Purpose of Disbursement RENT	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9372
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 53.50
City FRAMINGHAM	State MA Zip Code 01702	
Purpose of Disbursement SUPPLIES	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9317
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 107.52
City FRAMINGHAM	State MA Zip Code 01702	
Purpose of Disbursement SUPPLIES	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9323
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 01	

SUBTOTAL of Disbursements This Page (optional).....	911.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

A. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
SUPPLIES

Candidate Name
ALEX LAW FOR CONGRESS

Office Sought: House Senate President
State: NJ District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y
04 / 08 / 2016

Amount of Each Disbursement this Period
48.03

Memo Item

Transaction ID : SB17.9329

B. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
SUPPLIES

Candidate Name
ALEX LAW FOR CONGRESS

Office Sought: House Senate President
State: NJ District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y
04 / 11 / 2016

Amount of Each Disbursement this Period
50.33

Memo Item

Transaction ID : SB17.9330

C. STAPLES

Full Name (Last, First, Middle Initial)
Mailing Address 500 STAPLES DRIVE

City FRAMINGHAM State MA Zip Code 01702

Purpose of Disbursement
SUPPLIES

Candidate Name
ALEX LAW FOR CONGRESS

Office Sought: House Senate President
State: NJ District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y
04 / 11 / 2016

Amount of Each Disbursement this Period
23.70

Memo Item

Transaction ID : SB17.9332

SUBTOTAL of Disbursements This Page (optional)..... 122.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016		
Mailing Address 500 STAPLES DRIVE			Amount of Each Disbursement this Period 2.10		
City FRAMINGHAM	State MA	Zip Code 01702	Memo Item <input type="checkbox"/>		
Purpose of Disbursement SUPPLIES		Category/ Type 001	Transaction ID : SB17.9333		
Candidate Name ALEX LAW FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 01				

Full Name (Last, First, Middle Initial) B. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016		
Mailing Address 500 STAPLES DRIVE			Amount of Each Disbursement this Period 182.07		
City FRAMINGHAM	State MA	Zip Code 01702	Memo Item <input type="checkbox"/>		
Purpose of Disbursement SUPPLIES		Category/ Type 001	Transaction ID : SB17.9338		
Candidate Name ALEX LAW FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 01				

Full Name (Last, First, Middle Initial) C. STAPLES			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016		
Mailing Address 500 STAPLES DRIVE			Amount of Each Disbursement this Period 182.52		
City FRAMINGHAM	State MA	Zip Code 01702	Memo Item <input type="checkbox"/>		
Purpose of Disbursement SUPPLIES		Category/ Type 001	Transaction ID : SB17.9357		
Candidate Name ALEX LAW FOR CONGRESS					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: NJ	District: 01				

SUBTOTAL of Disbursements This Page (optional).....	366.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement MM / DD / YYYY 04 / 29 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 225.90 <input type="checkbox"/> Memo Item
City FRAMINGHAM	State MA	
Zip Code 01702	Purpose of Disbursement SUPPLIES	Transaction ID : SB17.9366
Candidate Name ALEX LAW FOR CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 30.28 <input type="checkbox"/> Memo Item
City FRAMINGHAM	State MA	
Zip Code 01702	Purpose of Disbursement SUPPLIES	Transaction ID : SB17.9369
Candidate Name ALEX LAW FOR CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 05 / 09 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 64.19 <input type="checkbox"/> Memo Item
City FRAMINGHAM	State MA	
Zip Code 01702	Purpose of Disbursement SUPPLIES	Transaction ID : SB17.9378
Candidate Name ALEX LAW FOR CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	320.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 34.74
City FRAMINGHAM	State MA	
Purpose of Disbursement SUPPLIES	Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Transaction ID : SB17.9382	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 500 STAPLES DRIVE		Amount of Each Disbursement this Period 36.81
City FRAMINGHAM	State MA	
Purpose of Disbursement SUPPLIES	Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Transaction ID : SB17.9391	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) C. SWITCH COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 100 CALIFORNIA ST		Amount of Each Disbursement this Period 41.54
City SAN FRANCISCO	State CA	
Purpose of Disbursement PHONE SERVICES	Category/ Type 001	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Transaction ID : SB17.9321	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	113.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SWITCH COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2016
Mailing Address 100 CALIFORNIA ST		Amount of Each Disbursement this Period 41.54
City SAN FRANCISCO	State CA	
Zip Code 94111	Purpose of Disbursement PHONE SERVICES	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 001	Transaction ID : SB17.9368
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period 49.00
City WASHINGTON	State DC	
Zip Code 20590	Purpose of Disbursement MAILINGS	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	Transaction ID : SB17.9320
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period 94.00
City WASHINGTON	State DC	
Zip Code 20590	Purpose of Disbursement MAILINGS	<input type="checkbox"/> Memo Item
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	Transaction ID : SB17.9341
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 01	

SUBTOTAL of Disbursements This Page (optional).....	184.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 49		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20590	Purpose of Disbursement MAILINGS	75.20
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9343
State: NJ District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20590	Purpose of Disbursement MAILINGS	3.94
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9349
State: NJ District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20590	Purpose of Disbursement MAILINGS	1500.00
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9358
State: NJ District: 01		

SUBTOTAL of Disbursements This Page (optional).....	1579.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 49			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 04 / 22 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20590	Purpose of Disbursement MAILINGS	1000.00
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9359
State: NJ District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 05 / 04 / 2016
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20590	Purpose of Disbursement MAILINGS	1000.00
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 004	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9371
State: NJ District: 01		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. VISTAPRINT		M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 275 WYMAN ST.		Amount of Each Disbursement this Period
City WALTHAM State MA Zip Code 02451	Purpose of Disbursement MATERIALS	38.49
Candidate Name ALEX LAW FOR CONGRESS	Category/Type 006	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9351
State: NJ District: 01		

SUBTOTAL of Disbursements This Page (optional).....	2038.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 49	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ALEX LAW FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALTERS SIGNS		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 159 W WHITE HORSE PIKE		Amount of Each Disbursement this Period 457.96 <input type="checkbox"/> Memo Item
City BERLIN State NJ Zip Code 08009	Purpose of Disbursement LAWN SIGNS 006 Category/Type	
Candidate Name ALEX LAW FOR CONGRESS		Transaction ID : SB17.9334
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 01	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

SUBTOTAL of Disbursements This Page (optional).....	457.96
TOTAL This Period (last page this line number only).....	14696.03

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

NAME OF COMMITTEE (In Full) **ALEX LAW FOR CONGRESS** Transaction ID : **SC/10.4135**

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
ALEXANDER LAW Primary
 Mailing Address 204 HILLCREST AVE APT A General
 Other (specify) ▼

City State ZIP Code
 COLLINGSWOOD NJ 08108

Original Amount of Loan 3600.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3600.00
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TERMS

Date Incurred M 02 / D 27 / Y 2015	Date Due M / D / Y 11/8/2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....	3600.00
TOTALS This Period (last page in this line only).....	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **ALEX LAW FOR CONGRESS** Transaction ID : **SC/10.4381**

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016
ALEXANDER LAW Primary
 Mailing Address 204 HILLCREST AVE APT A General
 Other (specify) ▼

City State ZIP Code
 COLLINGSWOOD NJ 08108

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS Date Incurred Date Due Interest Rate Secured:
 07 / 28 / 2015 M M / D D / 11/8/2016 Y Y Y Y 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional).....	3000.00
TOTALS This Period (last page in this line only).....	6600.00

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