REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
C00214643 053096 P 249
FRANK SERGE
NEW JERSEY STATE LABORERS' POL
ITICAL ACTION COMMITTEE/LABORE
311 VALLEY STREET
SOUTH ORANGE NJ 07079

2. FEC IDENTIFICATION NUMBER

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period April 1 1994 through June 30 1994		$ 700318.27
6. (a) Cash on Hand January 1, 19 94	$ 752676.60	
(b) Cash on Hand at Beginning of Reporting Period	$ 73357.61	$ 223574.94
(c) Total Receipts (from Line 19)	$ 826029.21	$ 923893.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 223789.46	$ 321653.46
7. Total Disbursements (from Line 30)	$ 602239.75	$ 602239.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer: Frank Serge

Signature of Treasurer: [signature]

Date: 7/14/94

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

FEC FORM 3X
(revised 9/93)

9 4 0 3 9 1 0 1 4 5 7

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/94)

NAME OF COMMITTEE: New Jersey State Laborers - Political Action Committee

REPORT COVERING PERIOD FROM: April 1 1994 TO: June 30 1994

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	61503.68	211726.01
ii. Unitemized	61503.68	211726.01
iii. Total (add i and ii) ➤		
b. Political Party Committees		
c. Other Political Committees (such as PACs)	61503.68	211726.01
d. Total Contributions (add a iii, b and c) ➤		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	11848.93	11848.93
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity	73352.61	223574.94
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	73352.61	223574.94
20. Total Federal Receipts (subtract line 18 from line 19) ➤		
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	48518.57	104732.57
ii. Non-Federal Share	48518.57	104732.57
b. Other Federal Operating Expenditures (add a i, a ii, and b) ➤		
c. Total Operating Expenditures		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) ➤	175270.89	216920.89
29. Other Disbursements	223789.46	321653.46
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	223789.46	321653.46
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	61503.68	211726.01
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	61503.68	211726.01
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	48518.57	104732.57
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤	48518.57	104732.57

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

New Jersey STATE LABORERS Political Action Committee

A. Full Name, Mailing Address and ZIP Code FIRST FIDELITY BANK TRUST DEPARTMENT 765 BROAD STREET NEWARK NJ 07102 Receipt For: ☐ Primary ☐ General ☒ Other (specify): Investment Income	Name of Employer Occupation Aggregate Year-to-Date $ 11848.93	Date (month, day, year) 1/1/94 6/30/94	Amount of Each Receipt this Period $ 11848.93
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	11848.93
TOTAL This Period (last page this line number only)	11848.93

9403910459

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

NJ STATE LABORERS POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. ORANSKY, SCARAGGI, & GORG 377 SO. HARRISON ST. EAST ORANGE, NJ 07018	PROFESSIONAL FEES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/4/94	1500.00
B. CAPITAL CONFERENCE CATERING 725 2ND ST. N.W. P.O. BOX 96480 WASHINGTON D.C. 20077	OFFICE EXPENSE Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/12/94	500.00
C. FRANK SORGE 131 PARK AVE. RANDOLPH, NJ 07869	PAYROLL Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	301.55
D. RICHARD CAIVANO 228 GLEN AVE. MILLBURN, NJ 07041	PAYROLL Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	1101.15
E. FIRST FIDELITY BANK 394 SCOTLAND RD. ORANGE, NJ 07050	PAYROLL TAXES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	3567.20
F. GRACE APPLEGATE 599 BENNINGTON DR. UNION, NJ 07050	PAYROLL Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	2231.46
G. NJ. CELL P.O. BOX 25 ELIZABETH, NJ 07215	OFFICE EXPENSE Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	20.65
H. INNOVATIVE SOFTWARE SOL. 1060 N. KNOLL HIGHWAY CHERRY HILL, NJ 08034	OFFICE EXPENSE Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	250.00
I. FIRST FIDELITY BANK 394 SCOTLAND RD ORANGE, NJ 07050	PAYROLL TAXES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	2840.00

SUBTOTAL of Disbursements This Page (optional) 15214.91

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

NJ STATE LABORERS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FIRST FIDELITY BANK 394 SCOTLAND RD. ORANGE, NJ 07050	PAYROLL TAXES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	160.62
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
STATE OF NJ CIT CN 238 TRENTON, NJ 08625	PAYROLL TAXES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	422.91
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
NJ DEPT OF LABOR CN 939 TRENTON, NJ 08625	PAYROLL TAXES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/25/94	038.53
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
GEORGE VAN HUFF TRUSTEE 716 GAIL DRIVE NEPTUNE, NJ 07753	TRUSTEE FEES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/28/94	500.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
JOSEPH DULID TRUSTEE P.O. BOX 277 MORRIS PLAINS, NJ 07950	TRUSTEE FEES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/28/94	500.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
RAYMOND POCINO TRUSTEE 604 BORDENTOWN RD. TRENTON, NJ 08610	TRUSTEE FEES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	4/28/94	500.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
NJ LEGET P.O BOX 3386 UNION, NJ 07083	LOBBYIST EXPENSE Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/3/94	248.15
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
CIF / PTK P.O. BOX 595 NEWARK, NJ 07101	PAYROLL TAX Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/17/94	3.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
MORTENSON & ASSOCIATES 349 NORTH AVENUE GRANFORD, NJ 07016	PROFESSIONAL FEES Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	5/18/94	3552.00

SUBTOTAL of Disbursements This Page (optional) 8023.27

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

NJ STATE LABORERS POLITICAL ACTION COMMITTEE

Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. STATE OF NJ GIT CN 248 TRENTON, NJ 08625	PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/18/94	106.14
B. RICHARD CAIVANO 228 GLEN AVE. MILLBURN, NJ 07041	PAYROLL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/94	1101.15
C. GRACE APPLEGATE 599 BENNINGTON DR. UNION, NJ 07050	PAYROLL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/94	2231.46
D. FRANK SORGE 131 PARK AVENUE RANDOLPH, NJ 07869	PAYROLL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/94	320.55
E. FIRST FIDELITY BANK 394 SCOTLAND RD. ORANGE, NJ 07050	PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/94	3567.20
F. NJ BELL P.O. BOX 35 ELIZABETH, NJ 07215	OFFICE EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	5/23/94	20.54
G. SUBURBAN BUSINESS MACHINES 1053 STUYVESANT AVE. UNION, NJ 07083	OFFICE EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/8/94	42.35
H. NJ LECET P.O. BOX 3786 UNION, NJ 07083	LOBBYIST EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/28/94	803.88
I. BLUE CROSS & SHIELD NJ P.O. BOX 984 NEWARK, NJ 07101	INSURANCE EXP. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/28/94	734.70

SUBTOTAL of Disbursements This Page (optional)	11808.97
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

NJ STATE LABORERS POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. NJ BELL P.O. BOX 25 ELIZABETH, NJ 07015	OFFICE EXPENSE	6/28/94	19.27
B. FIRST FIDELITY BANK 394 SCOTLAND RD. ORANGE, NJ 07050	PAYROLL TAXES	6/28/94	4560.90
C. FRANK SORGE 131 PARK AVE MILLBURN, NJ 07041	PAYROLL	6/28/94	3900.05
D. RICHARD CAIVANO 028 GLEN AVE. MILLBURN, NJ 07041	PAYROLL	6/28/94	1373.64
E. GRACE APPLEGATE 599 BENNINGTON DR. UNION, NJ 07070	PAYROLL	6/28/94	2500.67
F. NJ LCCET P.O. BOX 3326 UNION, NJ 07083	LOBBYIST EXPENSE	6/30/94	817.79
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) 13,472.34

TOTAL This Period (last page this line number only) 48,518.57

9 4 0 3 2 1 0 1 4 6 3

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

New Jersey State Laborers Political Action Committee

Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Burlington County Dem Comm P.O. Box 1046 Delran NJ 08075	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/6/94	1000.00
B. Full Name, Mailing Address and ZIP Code Friends of Whelan 3716 S. Boulevard Ave. Atlantic City NJ 08401	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/6/94	1000.00
C. Full Name, Mailing Address and ZIP Code Hudgins 94 Committee 1400 Emerson Ave Atlantic City NJ 08401	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/6/94	1000.00
D. Full Name, Mailing Address and ZIP Code Assembly Republican Majority P.O. Box 268 Hackettstown NJ 07840	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/6/94	20000.00
E. Full Name, Mailing Address and ZIP Code Republican Sen Inner Circle 425 2nd St NE P.O. Box 96489 Washington D.C. 20077	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/12/94	2000.00
F. Full Name, Mailing Address and ZIP Code Concerned Candidates 1994 815 Glen Rd Fort Lee NJ 07024	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/12/94	3000.00
G. Full Name, Mailing Address and ZIP Code Bob Martin Election Fund N. Gibraltar Dr Suite 2-G Morris Plains NJ 07950	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/12/94	600.00
H. Full Name, Mailing Address and ZIP Code Elect Assn of Anthony Imperiale 1066 Floral Terr Secaucus NJ 07094	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/14/94	500.00
I. Full Name, Mailing Address and ZIP Code Schuber for Bergen 11 State St Hackensack NJ 07601	Disbursement for: ✓ Primary ☐ General ☐ Other (specify)	4/13/94	2000.00

SUBTOTAL of Disbursements This Page (optional)	31100.00
TOTAL This Period (last page this line number only)	

9 4 0 3 9 1 0 1 4 5 4

SCHEDULE B ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

NJ STATE LABORES POLITICAL ACTION COMMITTEE

Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. COMM. ELECT CONNORS, MORAN, EDWARD 850 BERGEN AVE. JERSEY CITY, NJ 07306	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/13/94	500.00
B. LABORERS' POLITICAL LEAGUE 905 16TH ST. WASHINGTON, D.C. 20006	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/13/94	50,000.00
C. ELECT FUND OF GEORGE BRANCH 920 BROAD STREET NEWARK, NJ 07112	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/25/94	1000.00
D. COMM. TO ELECT MILDRED CRUMP 88 HANSBURY AVE NEWARK, NJ 07112	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/25/94	1000.00
E. UNITED FOR LOWER TAXES 376 RIDGELEY STREET PERTH AMBOY, NJ 08861	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/27/94	2000.00
F. ELECT DESENA '94 823 BROADWAY BAYONNE, NJ 07002	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/28/94	1000.00
G. COMM. TO RE-ELECT JA CAVANAGH P.O. BOX 1422 FAIRFIELD, NJ 07004	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/3/94	1500.00
H. PEOPLE FOR BURNHAM & CARRIGAN 116 WHITEHORSE PIKE HADDON HEIGHTS, NJ 08035	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/3/94	1500.00
I. ELECT FUND OF THOMAS V. GIBLIN P.O. BOX 27 CALDWELL, NJ 07006	Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/12/94	5000.00

SUBTOTAL of Disbursements This Page (optional) 63500.00

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

9 4 0 3 9 . 0 1 4 6 5

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

NEW JERSEY STATE LABOREAS Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIENDS of Bill Simon 308 Lewis Ave OAKLAND NJ 08107	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	5/16/94	1000.00
B. Full Name, Mailing Address and ZIP Code Elect DESENA 94 823 Broadway Bayonne NJ 07002	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	5/16/94	1000.00
C. Full Name, Mailing Address and ZIP Code Dept of Veterans Affairs 1645 E. Woodward St Austin TX 78772	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/8/94	470.89
D. Full Name, Mailing Address and ZIP Code NJ Democratic State Comm 150 West State St Trenton NJ 08608	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/8/94	1500.00
E. Full Name, Mailing Address and ZIP Code Dolie Dem Leadership Fund 235 Broadway Bayonne NJ 07002	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/13/94	500.00
F. Full Name, Mailing Address and ZIP Code District 7 Countdown P.O. Box 1161 Delran NJ 08075	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/16/94	1000.00
G. Full Name, Mailing Address and ZIP Code FRIENDS TO Elect Michael Deresa 604 Frank Rodgers Blvd Harrison NJ 07029	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/23/94	2000.00
H. Full Name, Mailing Address and ZIP Code FRIENDS of John A Lynch Comm 2849 Woodbridge Ave Edison NJ 08817	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/28/94	1200.00
I. Full Name, Mailing Address and ZIP Code LABOREAS Political League 905 16th Street Washington D.C. 20006	Disbursement for: [x] Primary [ ] General [ ] Other (specify)	6/28/94	75000.00

SUBTOTAL of Disbursements This Page (optional) 83670.89

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

9 4 0 3 9 1 0 1 4 6 6

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

NJ STATE LABORERS POLITICAL ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIEND OF WAYNER. BRYANT P.O. BOX 526 CAMDEN, NJ 08102	Disbursement for: [ ] Primary [ ] General [X] Other (specify) VOID CHECK	10/15/93	(1000.00)
B. Full Name, Mailing Address and ZIP Code FRIEND OF JOE ROBERTS 93 P.O. BOX 1362 BELMAR, NJ 08031	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [X] Other (specify) VOID CHECK	10/15/93	(500.00)
C. Full Name, Mailing Address and ZIP Code NEIGHBORS FOR CALLAHAN-HARRISON P.O. BOX 27 EGG HARBOR, NJ 08215	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [X] Other (specify) VOID CHECK	10/29/93	(750.00)
D. Full Name, Mailing Address and ZIP Code FRIENDS OF TOM FOLEY P.O. BOX 1644 GALLOWAY, NJ 08201	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [X] Other (specify) VOID CHECK	10/29/93	(750.00)
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	(3000.00)
TOTAL This Period (last page this line number only)	175,370.89

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 7-15-94
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☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

7-18-94

DATE PREPARED

FEC FORM 70-2 (12/92)

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