

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Donald M Payne, Jr. for Congress			
ADDRESS (number and street) PO Box 2406			
CITY, STATE, and ZIP CODE Newark NJ 07114			
2. NAME OF CANDIDATE Mr. Donald Payne Jr	3. OFFICE SOUGHT (State and District) House NJ 10		4. FEC IDENTIFICATION NUMBER C00519355
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Asbestos Workers Political Action Committee 9602 Martin Luther King Highway Lanham MD 20706	Name of Employer Occupation	Date (month, day, year) 06/03/2016	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Jordan Badia -Bellinger 92 High St Brookline MA 02445-7718	Name of Employer National Basket ball Association Occupation Senior Coordinator Team Marketing &	Date (month, day, year) 06/03/2016	Amount 2600.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Patricia S Bellinger 92 High St Brookline MA 02445-7718	Name of Employer Harvard Kennedy School Center for Publ Occupation Executive Director /Adjunct Lecturer	Date (month, day, year) 06/03/2016	Amount 2600.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Election Fund of Thomas P. Giblin PO Box 43026 Montclair NJ 07043-0026	Name of Employer Occupation	Date (month, day, year) 06/03/2016	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE IBEW PAC VOLUNTARY FUND 900 SEVENETH STREET N.W. Washington DC 20001	Name of Employer Occupation	Date (month, day, year) 06/03/2016	Amount 2000.00
SIGNATURE (optional) Mr. H. O'Neil Williams <i>[Electronically Filed]</i>		DATE 06/04/2016	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE James E Johnson 124 Clinton Ave Montclair NJ 07042-2015	Name of Employer Debevoise & Plimpton Transaction ID : VN8ZJEMQGQ5 Occupation Partner	Date (month, day, year) 06/03/2016	Amount 2100.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Alan Jones 90 E End Ave New York NY 10028-8000	Name of Employer Morgan Stanley Transaction ID : VN8ZJEMQEX0 Occupation VP Financial Advisor	Date (month, day, year) 06/03/2016	Amount 2600.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE M. Brian Maher 95 Hemlock Rd Short Hills NJ 07078-1823	Name of Employer Retired Transaction ID : VN8ZJEMQD18 Occupation Retired	Date (month, day, year) 06/03/2016	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Marcia Marley 139 Union St Montclair NJ 07042-2102	Name of Employer BlueWave NJ Transaction ID : VN8ZJEMQGJ5 Occupation Community Organizer	Date (month, day, year) 06/03/2016	Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Nancy E Northrop 124 Clinton Ave Montclair NJ 07042-2015	Name of Employer Transaction ID : VN8ZJEMQGN9 Occupation	Date (month, day, year) 06/03/2016	Amount 2100.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Richard T Thigpen 8 Willowdale Court Montclair NJ 07042	Public Service Electric & Gas Occupation VP Govt Affairs	06/03/2016	1000.00
Transaction ID : VN8ZJEMQCX6			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Timothy A Wilkins 601 Lexington Ave New York NY 10022-4611	Freshfields Bruckhaus Deringer LLP Occupation Attorney	06/03/2016	2600.00
Transaction ID : VN8ZJEMQH14			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount

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