

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

New Jersey First

ADDRESS (number and street)

196 West State Street

☐Check if different  
than previously  
reported. (ACC)

Trenton

NJ

08608

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00391458

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

16

2008

through

11

24

2008

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

Type or Print Name of Treasurer

Peter D. Nichols

Signature of Treasurer

Electronically Filed by Peter D. Nichols

Date

12

02

2009

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
New Jersey First

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2008	32142.45
(b) Cash on Hand at Beginning of Reporting Period .....	112903.01	
(c) Total Receipts (from Line 19) .....	50500.00	282266.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	163403.01	314409.01
7. Total Disbursements (from Line 31) .....	38000.00	189006.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	125403.01	125403.01
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# **DETAILED SUMMARY PAGE** **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

New Jersey First

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Wendy W Benchley

Mailing Address 35 Boudinot Street

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: SA11AI.5401

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hilltop Associates

Mailing Address PO Box 457

City

Woodbridge

State

NJ

Zip Code

07095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5405

Amount of Each Receipt this Period

2500.00

Receipt (Partnership)

**C.**

Full Name (Last, First, Middle Initial)

Murray Halpern

Mailing Address PO Box 457

City

Woodbridge

State

NJ

Zip Code

07095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hilltop AssociatesOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5405.0

Amount of Each Receipt this Period

2500.00

Memo (Partner Share)

[MEMO ITEM]

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

3500.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Richard B Leventhal

Mailing Address 47 Essex Drive

City

Tenafly

State

NJ

Zip Code

07670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fedway AssociatesOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5390

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Luke

Mailing Address 30 Longell Drive

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grove AssociatesOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: SA11AI.5392

Amount of Each Receipt this Period

5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ronald O Perelman

Mailing Address 35 East 62nd Street

City

New York

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MacAndrews & ForbesOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5403

Amount of Each Receipt this Period

5000.00

Receipt

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

15000.00

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

B. Form/Schedule : **SA11AI**  
Transaction ID : **SA11AI.5392**

Excess Refunded.



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

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

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Arthur F Ryan

Mailing Address 10 Oak Forest Lane

City

Mendham

State

NJ

Zip Code

07945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Financial Inc

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.5411

Amount of Each Receipt this Period

2000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Larry A Silverstein

Mailing Address 250 Greenwich Street

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silverstein Properties

Occupation  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5409

Amount of Each Receipt this Period

5000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rohinton D Toddywala

Mailing Address 5 Lavendar Drive

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nostrum Technologies LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5397

Amount of Each Receipt this Period

5000.00

Receipt

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

12000.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Trafalgar Associates

Mailing Address PO Box 457

City

Woodbridge

State

NJ

Zip Code

07095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5407

Amount of Each Receipt this Period

2500.00

Receipt (Partnership)

**B.**

Full Name (Last, First, Middle Initial)

Samuel Halpern

Mailing Address PO Box 457

City

Woodbridge

State

NJ

Zip Code

07095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Trafalgar Associates

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11AI.5407.0

Amount of Each Receipt this Period

2500.00

Memo (Partner Share)

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Deborah Vanderbeek

Mailing Address 3 Hilltop Court

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5399

Amount of Each Receipt this Period

5000.00

Receipt

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Vanderbeek

Mailing Address 3 Hilltop Court

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Jersey Devils

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5400

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Zygmunt Wilf

Mailing Address 500 Ashwood Road

City

Springfield

State

NJ

Zip Code

07081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Garden Homes

Occupation  
Real Estate Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11AI.5393

Amount of Each Receipt this Period

5000.00

Receipt

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

10000.00

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

48000.00

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

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

FOR LINE NUMBER: PAGE 12 / 18

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

DRIVE (Democrat Republican Independent Voter Education) PAC for IBT

Mailing Address 25 Louisiana Avenue NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11C.5395

Amount of Each Receipt this Period

2500.00

Receipt

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

2500.00

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

2500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 18

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

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

Common Sense Consulting

Mailing Address 222 Stony Brook Road

City  
Hopewell

State  
NJ

Zip Code  
08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Transaction ID: SB21B.5424

Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 18

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
New Jersey First

<b>A.</b> Full Name (Last, First, Middle Initial) Franken Recount Fund	<b>Transaction ID:</b> SB23.5427 <b>Date of Disbursement</b>
Mailing Address 4190 Vinewood Lane	<div> <div>11</div> <div>07</div> <div>2008</div> </div>
City Minneapolis State MN Zip Code 55442	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution - Federal	<div>10000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	<b>Transaction ID:</b> SB23.5429 <b>Date of Disbursement</b>
Mailing Address PO Box 3197	<div> <div>11</div> <div>12</div> <div>2008</div> </div>
City Little Rock State AR Zip Code 72203	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution - Federal	<div>5000.00</div>
Candidate Name Blanche Lincoln	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Martin Victory Committee	<b>Transaction ID:</b> SB23.5425 <b>Date of Disbursement</b>
Mailing Address PO Box 7219	<div> <div>11</div> <div>06</div> <div>2008</div> </div>
City Atlanta State GA Zip Code 30357	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution - Federal	<div>10000.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

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

25000.00

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

**B.** Form/Schedule : **SB23**  
Transaction ID : **SB23.5429**

Incorrect election designation reported on original filing. Election designation revised to correctly report intended period. Recipient committee correctly reported initial contribution.

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 18

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

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

Zeitz for Congress

Mailing Address PO Box 560

City  
Bordentown

State  
NJ

Zip Code  
08505

Purpose of Disbursement  
Contribution - Federal

Candidate Name  
Joshua M Zeitz

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ

District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.5417

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2008

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

30000.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 18

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

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

James Luke

Mailing Address 30 Longell Drive

City  
Wayne

State  
NJ

Zip Code  
07470

Purpose of Disbursement  
Contribution Refund

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB28A.5434

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 18

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

Atlantic County Democratic Committee

Mailing Address 1 North New York Road

City State Zip Code  
Galloway NJ 08205

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.5420

Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Friends of Leitner & McHugh

Mailing Address 804 Donna Drive

City State Zip Code  
Point Pleasant NJ 08742

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.5421

Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Roseland Democratic County Committee

Mailing Address 4 Cooper Avenue

City State Zip Code  
Roseland NJ 07068

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.5432

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

500.00

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

6000.00

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

6000.00