

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For 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

Committee To Reelect Congressman Chris Smith

ADDRESS (number and street)  
▼

P.O. Box 3184

☐Check if different  
than previously  
reported. (ACC)

Hamilton

NJ

08619

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00096412

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

NJ

04

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 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2008

through

03

31

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

Constance Carey

Signature of Treasurer

Electronically Filed by Constance Carey

Date

04

15

2008

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period:

From:

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

To:

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

	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)).....	141045.41	408135.45
(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)).....	141045.41	408135.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	75739.44	174173.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	664.24
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	75739.44	173509.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	468384.54	
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	

## 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)

Page 3

Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period:

From:

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

To:

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

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

35550.00

150347.20

(ii) Unitemized.....

68395.41

134888.25

(iii) TOTAL of contributions

103945.41

285235.45

from individuals..... ▶

300.00

1800.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

36800.00

121100.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS  
(other than loans)

141045.41

408135.45

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

664.24

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

1602.20

8526.41

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

142647.61

417326.10

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	75739.44	174173.41
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.....	3530.00	19690.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	79269.44	193863.41

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	405006.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	142647.61
25. SUBTOTAL (add Line 23 and Line 24).....	547653.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	79269.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	468384.54

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

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

FOR LINE NUMBER: PAGE 5 / 96

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Millstone Twp. Repub. Cnty. Exec. Comm.

Mailing Address PO Box 65

City

Perrineville

State

NJ

Zip Code

08535

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80110.C30447

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

300.00

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

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

FOR LINE NUMBER: PAGE 6 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Route One Center, LLC

Mailing Address 1018 Whitehead Road Ext.

City

State

Zip Code

Ewing

NJ

08638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80126.C31107

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Simone

Mailing Address 1018 Whitehead Road Ext.

City

State

Zip Code

Trenton

NJ

08638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quakerbridge Investment  
Group

Occupation

Real Estate Sales & Dvlpmnt

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80126.C31111

Amount of Each Receipt this Period

200.00

Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership->Route One Ce-  
nter, LLC

**C.**

Full Name (Last, First, Middle Initial)

Route One Center, LLC

Mailing Address 1018 Whitehead Road Ext.

City

State

Zip Code

Ewing

NJ

08638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80318.C31311

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Route One Center, LLC

Mailing Address 1018 Whitehead Road Ext.

City

State

Zip Code

Ewing

NJ

08638

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32294

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Simone

Mailing Address 1018 Whitehead Road Ext.

City

State

Zip Code

Trenton

NJ

08638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quakerbridge Investment  
Group

Occupation

Real Estate Sales & Dvlpmnt

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32295

Amount of Each Receipt this Period

200.00

Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership->Route One Ce-  
nter, LLC

**C.**

Full Name (Last, First, Middle Initial)

Phil Angarone, Sr.

Mailing Address 12 Lohli Drive

City

State

Zip Code

Hamilton Square

NJ

08690-2412

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Holman Group

Occupation

Principal

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 8

Transaction ID: 80318.C31789

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Phil Angarone, Sr.

Mailing Address 12 Lohli Drive

City

Hamilton Square

State

NJ

Zip Code

08690-2412

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Holman Group

Occupation

Principal

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 80329.C32316

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Linda Apgar

Mailing Address 23 Elizabeth Avenue

City

Hamilton

State

NJ

Zip Code

08610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 80329.C32085

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ed Atkinson

Mailing Address 68 Lillie Street

City

Princeton Junction

State

NJ

Zip Code

08550-1308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80329.C32212

Amount of Each Receipt this Period

125.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

William Bausch

Mailing Address P.O. Box 1068

City

Point Pleasant Bea

State

NJ

Zip Code

08742-1068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80329.C32220

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Bell

Mailing Address 8602 Ordinary Way

City

Annandale

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital City Partners

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33841

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JonMarc Buffa

Mailing Address 45 Homestead Road

City

Freehold

State

NJ

Zip Code

07728-1516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
sonnenschein, Nath & Rose-  
nthal

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32279

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Francis Cannon

Mailing Address 6217 Lee Highway

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80331.C32620

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ryan Carney

Mailing Address 1712 W. Abingdon Drive, Apt. 302

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32613

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

George Charbonneau

Mailing Address 3 Dan Rd

City

Trenton

State

NJ

Zip Code

08620-1617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sarnoff Research

Occupation

Contract Administrator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31832

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2450.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Dolores Charlock

Mailing Address 7 Eastport Ct

City

Red Bank

State

NJ

Zip Code

07701-5431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: 80408.C33182

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Dolores Charlock

Mailing Address 7 Eastport Ct

City

Red Bank

State

NJ

Zip Code

07701-5431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: 80329.C32104

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Yung-Ching Chu

Mailing Address 6 Susan Drive

City

Marlboro

State

NJ

Zip Code

07746-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NJ State

Occupation

MD

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 80318.C31231

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Yung-Ching Chu

Mailing Address 6 Susan Drive

City

Marlboro

State

NJ

Zip Code

07746-1638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NJ State

Occupation

MD

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31824

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Grace Clancy

Mailing Address 32 Mansfield Drive

City

Brick

State

NJ

Zip Code

08724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80329.C32299

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Denis Coleman

Mailing Address PO Box 2615

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Transaction ID: 80412.C33833

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Lisa Correnti

Mailing Address 680 San Fernando Street

City

San Diego

State

CA

Zip Code

92106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33836

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Joseph Cosby

Mailing Address 7327 Poplar Court

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tighe Patton

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80412.C33829

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Robert Crispo

Mailing Address 24 Cove Avenue

City

Saco

State

ME

Zip Code

04072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80318.C31209

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Marian Cross

Mailing Address 46 Taylor Terrace

City

Hopewell

State

NJ

Zip Code

08525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lamplyhter

Occupation

Asst Mgr

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80329.C32102

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David Cushwa

Mailing Address 18 Lodges Lane

City

Bala Cynwyd

State

PA

Zip Code

19004-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80110.C30444

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David Cushwa

Mailing Address 18 Lodges Lane

City

Bala Cynwyd

State

PA

Zip Code

19004-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80329.C32206

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Lawrence De George

Mailing Address 140 Intracoastal Pointe Dr

City

Jupiter

State

FL

Zip Code

33477-5096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80408.C32742

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Cortes DeRussy

Mailing Address 50 Hampshire Road

City

Bronxville

State

NY

Zip Code

10708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northern Leasing

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Transaction ID: 80412.C33832

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Deborah Desaye

Mailing Address 13 Driftwood Lane

City

Colts Neck

State

NJ

Zip Code

07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Housewife

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80111.C30537

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Charles Donovan

Mailing Address 9200 Maple Street

City

Manassas

State

VA

Zip Code

20110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Family Research Council

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33839

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Rita Duenas

Mailing Address 23 Empress Ct

City

Freehold

State

NJ

Zip Code

07728-4303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Church & Dwight, INC

Occupation

Chemist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80318.C31292

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

James Duff

Mailing Address 6703 Sheridan Ave

City

Des Moines

State

IA

Zip Code

50322-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80408.C33294

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Joseph Dunn

Mailing Address 642 Oceanview Road

City

Brielle

State

NJ

Zip Code

08730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31823

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mildred Dunn

Mailing Address 2121 Meadowlark Rd Apt 420

City

Manhattan

State

KS

Zip Code

66502-4573

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80408.C33050

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

William Ecks

Mailing Address 1203 Genesee Street

City

Trenton

State

NJ

Zip Code

08610-6202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: 80318.C31239

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Louis Fares

Mailing Address 2759 Nottingham Way

City

Mercerville

State

NJ

Zip Code

08619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80329.C32103

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

William Feiler

Mailing Address 386 Upper Mountain Ave

City

Montclair

State

NJ

Zip Code

07043-1437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan & Finnegan, LLP

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80318.C31767

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

William Feiler

Mailing Address 386 Upper Mountain Ave

City

Montclair

State

NJ

Zip Code

07043-1437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan & Finnegan, LLP

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80329.C32096

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Pat Flannery

Mailing Address 217 Hancock Ave

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brigdwater Council

Occupation

Councilwoman

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80110.C30449

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Pat Flannery

Mailing Address 217 Hancock Ave

City

Bridgewater

State

NJ

Zip Code

08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brigdwater Council

Occupation

Councilwoman

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 80318.C31776

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Edward Flynn

Mailing Address 720 Old Hunt Way

City

Herndon

State

VA

Zip Code

22070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80408.C32676

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Tom Gagliano

Mailing Address 63 Ambassador Drive

City State Zip Code  
 Red Bank NJ 07701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Attorney

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

Election Cycle-to-Date ▼

1497.20

Date of Receipt

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

Transaction ID: 80318.C31222

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CRCCS

Occupation  
Campaign Manager

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

Election Cycle-to-Date ▼

25.00

Date of Receipt

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

Transaction ID: 80412.C33819

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CRCCS

Occupation  
Campaign Manager

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

Election Cycle-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 4 / 2 0 0 8

Transaction ID: 80318.C31294

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1225.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Gary Gordon

Mailing Address 149 Patriots Rd

City

Morris Plains

State

NJ

Zip Code

07950-1148

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80330.C32448

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Richard Gregg

Mailing Address 80 Trommel Dr

City

Mahwah

State

NJ

Zip Code

07430-1533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Gregg Company, Ltd

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 7 / 2 0 0 8

Transaction ID: 80408.C33296

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Paul Griffin

Mailing Address 407 Valley Road

City

Neptune

State

NJ

Zip Code

07753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bell Atlantic

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 8

Transaction ID: 80318.C31782

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

475.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Paul Griffin

Mailing Address 407 Valley Road

City

Neptune

State

NJ

Zip Code

07753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bell Atlantic

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: 80330.C32449

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Margaret Heckler

Mailing Address 1401 N., Oak Street, #904

City

Arlington

State

VA

Zip Code

22209-3650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32608

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Robert Heckman

Mailing Address 143 Martin Lane

City

Alexandria

State

VA

Zip Code

22304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital City

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32610

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Susan Hirschmann

Mailing Address 4052 Seminary Road

City

Alexandria

State

VA

Zip Code

22304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Williams

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33838

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Horton

Mailing Address 2434 Evergreen

City

Pampa

State

TX

Zip Code

79065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32606

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Michael Hrize

Mailing Address 16 Willowwood Court

City

Columbus

State

NJ

Zip Code

08022-1025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

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

Transaction ID: 80318.C31215

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Michael Hrize

Mailing Address 16 Willowwood Court

City

Columbus

State

NJ

Zip Code

08022-1025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32290

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Deal Hudson

Mailing Address 9038 Ashmeade Drive

City

Fairfax

State

VA

Zip Code

22032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morley Publishing

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33840

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Elbert Husted

Mailing Address PO Box 249

City

Mantoloking

State

NJ

Zip Code

08738-0249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80318.C31240

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Elbert Husted

Mailing Address PO Box 249

City

Mantoloking

State

NJ

Zip Code

08738-0249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32287

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Betty Jacobsen

Mailing Address 5107 N. Major

City

Chicago

State

IL

Zip Code

60630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80331.C32597

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ursula Johnson

Mailing Address 27 Redhill Road

City

Manchester

State

NJ

Zip Code

08759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80318.C31284

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Ursula Johnson

Mailing Address 27 Redhill Road

City

Manchester

State

NJ

Zip Code

08759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80330.C32442

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Johnny Jones

Mailing Address 29 Challander Way

City

Florence

State

NJ

Zip Code

08505-4281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Navy Lakehurst

Occupation

Logistics Mgr

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80331.C32598

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Donal Keane

Mailing Address 831 Monroe Avenue

City

River Forest

State

IL

Zip Code

60305-1421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80329.C32293

Amount of Each Receipt this Period

400.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

John Keane

Mailing Address 33 Ellsworth Ave

City

Staten Island

State

NY

Zip Code

10312-2501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80408.C32845

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Keane

Mailing Address 33 Ellsworth Ave

City

Staten Island

State

NY

Zip Code

10312-2501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80330.C32444

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

J. Patrick Kearns

Mailing Address 1407 Mayhurst Blvd.

City

Mc Lean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fulcrum Securities

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80412.C33837

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Stephen Kempf

Mailing Address 1561 Silvertown Road

City

Toms River

State

NJ

Zip Code

08755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hatch Mott MacDonald

Occupation

VP

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 80329.C32297

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Russ Kerestes

Mailing Address 59C Buckingham Court

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Najarian Assoc

Occupation

Marketing

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 8

Transaction ID: 80318.C31792

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Russ Kerestes

Mailing Address 59C Buckingham Court

City

Lakewood

State

NJ

Zip Code

08701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Najarian Assoc

Occupation

Marketing

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31833

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Fred Kirschner

Mailing Address 402 Rising Sun Road

City

Bordentown

State

NJ

Zip Code

08505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bordentown Junction Truck-  
stop

Occupation

Partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80330.C32451

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Kneeleay

Mailing Address 605 Locust Road

City

Brielle

State

NJ

Zip Code

08730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 80110.C30445

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Robert Kneeleay

Mailing Address 605 Locust Road

City

Brielle

State

NJ

Zip Code

08730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80408.C32674

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Fred Kniesler

Mailing Address 172 Ellisdale Road

City

Allentown

State

NJ

Zip Code

08501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 80329.C32305

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Herbert Konrad

Mailing Address 601 Warwick Rd

City

Haddonfield

State

NJ

Zip Code

08033-3926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Konrad Beer Distributor  
Inc.

Occupation  
Manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80331.C32599

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Richard LaBonte

Mailing Address 343 Lake Ave. Box 292

City

Bay Head

State

NJ

Zip Code

08742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80331.C32590

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Thomas Lacey

Mailing Address 3239 Fuller Street

City

Philadelphia

State

PA

Zip Code

19136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wheaton Ind

Occupation

Computer Programmer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80126.C31108

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Lawrence Lee

Mailing Address 39644 Rosebay Court

City

Fort Mill

State

SC

Zip Code

29707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80331.C32596

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Francis Lehaney

Mailing Address 17 Riverdale Ave Rm 614

City

Yonkers

State

NY

Zip Code

10701-3646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80408.C33618

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Walter Lukens, III

Mailing Address 2307 Russel Road

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80331.C32621

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Chris Lupia

Mailing Address 32 Beaver Dam Road

City

Colts Neck

State

NJ

Zip Code

07722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 80318.C31774

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Maria Luzarraga

Mailing Address 44 Lenox Road

City

Summit

State

NJ

Zip Code

07901-3733

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lois Schneider Realtors

Occupation

Part-time Real estate

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31831

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2300.00

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

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

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

FOR LINE NUMBER: PAGE 33 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Leon Malterre

Mailing Address 155A Thornwood Drive

City

Mount Laurel

State

NJ

Zip Code

08054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80318.C31238

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Leon Malterre

Mailing Address 155A Thornwood Drive

City

Mount Laurel

State

NJ

Zip Code

08054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31828

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

William McCarthy

Mailing Address 46 Cranbury Rd

City

Princeton Junction

State

NJ

Zip Code

08550-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 80318.C31766

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Mary Jo McDermott

Mailing Address 4 Coddington Lane

City

Califon

State

NJ

Zip Code

07830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80408.C32677

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John McGrath

Mailing Address 905 Tudor Drive

City

Toms River

State

NJ

Zip Code

08753-7903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80318.C31268

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John McGrath

Mailing Address 905 Tudor Drive

City

Toms River

State

NJ

Zip Code

08753-7903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 9 / 2 0 0 8

Transaction ID: 80329.C32353

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1100.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Emmett McGroarty

Mailing Address 2911 Newark Street NW, Apt. 26

City

Washington

State

DC

Zip Code

20008-3348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32609

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roger McLaughlin

Mailing Address 1411 Crabapple Drive

City

Manasquan

State

NJ

Zip Code

08736

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McLaughlin, Middleton, As-  
soc.

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 80318.C31216

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Eileen Meagher

Mailing Address 2 Alyce Ct

City

Trenton

State

NJ

Zip Code

08648-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80318.C31227

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

FOR LINE NUMBER: PAGE 36 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Eileen Meagher

Mailing Address 2 Alyce Ct

City

Trenton

State

NJ

Zip Code

08648-3116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: 80320.C31830

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Richard Miller

Mailing Address 2628 Rycroft Ct

City

Chesterfield

State

MO

Zip Code

63017-7108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	8

Transaction ID: 80408.C33613

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Maura Mudd

Mailing Address 3542 Newark St NW

City

Washington

State

DC

Zip Code

20016-3168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80408.C33459

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1450.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)

Francesco Musorrafiti

Mailing Address 14 Bayside Drive

City

Atlantic Highlands

State

NJ

Zip Code

07716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eng. & Professional Serv  
Inc.

Occupation

Engineer

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

700.00

Date of Receipt

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

Transaction ID: 80318.C31223

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Louis Natale, Jr.

Mailing Address 4 Bedford Dr.

City

Trenton

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ritchie & Page Dist. Co.,  
Inc.

Occupation

President

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80318.C31312

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Louis Natale, Jr.

Mailing Address 4 Bedford Dr.

City

Trenton

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ritchie & Page Dist. Co.,  
Inc.

Occupation

President

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80329.C32223

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

John OBrien

Mailing Address 10933 SW 89th Ave

City

Ocala

State

FL

Zip Code

34481-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 80318.C31202

Amount of Each Receipt this Period

75.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John OBrien

Mailing Address 10933 SW 89th Ave

City

Ocala

State

FL

Zip Code

34481-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 80408.C33027

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John OBrien

Mailing Address 10933 SW 89th Ave

City

Ocala

State

FL

Zip Code

34481-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 9 / 2 0 0 8

Transaction ID: 80329.C32380

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

150.00

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

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

FOR LINE NUMBER: PAGE 39 / 96

(check only one)

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

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)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Patricia OBrien

Mailing Address 535 E 86th St

City

New York

State

NY

Zip Code

10028-7533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80408.C33073

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Harry Paalberg, Jr.

Mailing Address 1547 Logan Drive

City

Manasquan

State

NJ

Zip Code

08736-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boeing Co.

Occupation

Engineer

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80318.C31130

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Harry Paalberg, Jr.

Mailing Address 1547 Logan Drive

City

Manasquan

State

NJ

Zip Code

08736-2507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boeing Co.

Occupation

Engineer

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: 80320.C31826

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Mary Noel Page

Mailing Address 1297 Ballantrae Farm Drive

City State Zip Code  
 Mc Lean VA 22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

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

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

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

Transaction ID: 80330.C32450

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Robert Patterson

Mailing Address 610 Diskin Place SW

City State Zip Code  
 Leesburg VA 20175

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Federal Government

Occupation  
Speechwriter

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

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

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

Transaction ID: 80331.C32612

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

June Piola

Mailing Address 1511 Union-Wawaset Road

City State Zip Code  
 West Chester PA 19382

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

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

Transaction ID: 80412.C33835

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 41 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Andrew Prajec

Mailing Address 124 Harvard Street

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32611

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Tom Pyle

Mailing Address 50 Balsam Lane

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strathmore Univ Foundation

Occupation

Exec

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80318.C31218

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Tom Pyle

Mailing Address 50 Balsam Lane

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Strathmore Univ Foundation

Occupation

Exec

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80330.C32446

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

FOR LINE NUMBER: PAGE 42 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Max Rauscher

Mailing Address 380 Harper Avenue

City

State

Zip Code

Brick

NJ

08724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary
 ☐ General  
☐ Other (specify) ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	8

Transaction ID: 80320.C31813

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Robert Roe

Mailing Address 1680 Route 23, Suite 140  
PO Box 407

City

State

Zip Code

Wayne

NJ

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robert A. Roe Assoc

Occupation

Consultant

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary
 ☐ General  
☐ Other (specify) ▼

750.00

Date of Receipt

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

Transaction ID: 80110.C30448

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

John Ed Ryan

Mailing Address 50 Lacey Road, #C217

City

State

Zip Code

Whiting

NJ

08759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

Election Cycle-to-Date ▼

☒ Primary
 ☐ General  
☐ Other (specify) ▼

200.00

Date of Receipt

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

Transaction ID: 80318.C31230

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

John Ed Ryan

Mailing Address 50 Lacey Road, #C217

City

Whiting

State

NJ

Zip Code

08759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80329.C32132

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

J, R., Sanchez

Mailing Address 2820 Butler Bay Drive N.

City

Windermere

State

FL

Zip Code

34786

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80331.C32616

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mayda Sanchez

Mailing Address 2820 Butler Bay Drive N.

City

Windermere

State

FL

Zip Code

34786

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32615

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

FOR LINE NUMBER: PAGE 44 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Fred Scheigert

Mailing Address 123 S Pitt St

City

Alexandria

State

VA

Zip Code

22314-3111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	8

Transaction ID: 80329.C32207

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Thomas Simmons

Mailing Address 490 Meadowood Road

City

Jackson

State

NJ

Zip Code

08527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept. of Defense

Occupation

DCSW

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80126.C31109

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Thomas Simmons

Mailing Address 490 Meadowood Road

City

Jackson

State

NJ

Zip Code

08527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept. of Defense

Occupation

DCSW

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	8

Transaction ID: 80318.C31308

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

500.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Nancy Singer

Mailing Address 9 Sugarwood Way

City

Warren

State

NJ

Zip Code

07059-6792

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 9 / 2 0 0 8

Transaction ID: 80329.C32358

Amount of Each Receipt this Period

75.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

John Sommer

Mailing Address 172 Forest Ave

City

Verona

State

NJ

Zip Code

07044-1018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80330.C32436

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ada Strassenburgh

Mailing Address PO Box 608  
2370 R R 9

City

Ocean View

State

NJ

Zip Code

08230-0608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 80408.C33107

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Ada Strassenburgh

Mailing Address PO Box 608  
2370 R R 9

City State Zip Code  
Ocean View NJ 08230-0608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

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

Election Cycle-to-Date ▼  
150.00

Date of Receipt

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

Transaction ID: 80408.C33109

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Ada Strassenburgh

Mailing Address PO Box 608  
2370 R R 9

City State Zip Code  
Ocean View NJ 08230-0608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

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

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 80408.C33108

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Charles Stults, III

Mailing Address 408 Main Street, South

City State Zip Code  
Hightstown NJ 08520-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allen & Stults Co.

Occupation  
Insurance Broker

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: 80318.C31133

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1150.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

William Sullivan

Mailing Address 3429 North Abingdon Street

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80412.C33823

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Sarah Tarsney

Mailing Address 26 Sunset Ter

City

Tenafly

State

NJ

Zip Code

07670-1457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: 80318.C31291

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Barbara Tinari

Mailing Address 17 Cathedral Ave

City

Florham Park

State

NJ

Zip Code

07932-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 8

Transaction ID: 80329.C32222

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Cuc Tran

Mailing Address 3 Coventry Circle East

City

Marlton

State

NJ

Zip Code

08053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 8

Transaction ID: 80318.C31794

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Steven Wagner

Mailing Address 410 Constitution Avenue NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Executive

Occupation

The Renewal Forum

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80331.C32617

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Daniel Walsh

Mailing Address 4 North 32nd Avenue

City

Longport

State

NJ

Zip Code

08403-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medimmune, Inc.

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

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

Transaction ID: 80122.C31047

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 49 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Daniel Walsh

Mailing Address 4 North 32nd Avenue

City

Longport

State

NJ

Zip Code

08403-1524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medimmune, Inc.

Occupation

Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 80408.C32672

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

George Walsh

Mailing Address 7603 Maydan Lane

City

Falls Church

State

VA

Zip Code

22043-3129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federal Government

Occupation

Political Appointee

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80331.C32618

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

John Weir

Mailing Address 85 Park Edge

City

Berkeley Heights

State

NJ

Zip Code

07922-1282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 80330.C32441

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

FOR LINE NUMBER: PAGE 50 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Thomas Welsh

Mailing Address 1325 Prospect Ave

City

Bethlehem

State

PA

Zip Code

18018-4916

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired Bishop

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	8

Transaction ID: 80408.C33178

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Thomas Welsh

Mailing Address 1325 Prospect Ave

City

Bethlehem

State

PA

Zip Code

18018-4916

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired Bishop

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Transaction ID: 80329.C32282

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

John Whelan

Mailing Address 203 55th Street

City

Holmes Beach

State

FL

Zip Code

34217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OFK Inc.

Occupation

Information Requested

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	8

Transaction ID: 80412.C33831

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Jill White

Mailing Address 32 Monroe Dr

City

Trenton

State

NJ

Zip Code

08619-4323

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 80318.C31221

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Pauline Winterhalder

Mailing Address 527 Harris Avenue

City

Brielle

State

NJ

Zip Code

08730-1925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80329.C32101

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City

Lynchburg

State

VA

Zip Code

24502-5769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80408.C32689

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

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

FOR LINE NUMBER: PAGE 52 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City

Lynchburg

State

VA

Zip Code

24502-5769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 80408.C32690

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Josephine Wood

Mailing Address 1400 Enterprise Dr Apt N330

City

Lynchburg

State

VA

Zip Code

24502-5769

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 80408.C32688

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

James Wurz

Mailing Address 6301 Sutliff Rd

City

Oriskany

State

NY

Zip Code

13424-4326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80408.C33292

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1400.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 96

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Maggie Wynne

Mailing Address 1607 N. Jefferson Street

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federal Government

Occupation

Analyst

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32614

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Thaddeus Zuber

Mailing Address 60 Home Ave Apt N35

City

Rutherford

State

NJ

Zip Code

07070-1760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired Priest

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80110.C30414

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Thaddeus Zuber

Mailing Address 60 Home Ave Apt N35

City

Rutherford

State

NJ

Zip Code

07070-1760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired Priest

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: 80408.C33201

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

450.00

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

35550.00

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

FOR LINE NUMBER: PAGE 54 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

AFL-CIO COPE

Mailing Address 815 Sixteenth Street, NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80318.C31210

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Amer. Foreign Service Assn. PAC

Mailing Address 2101 E Street, NW

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80408.C32679

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

American Optometric Association PAC

Mailing Address 1505 Prince Street, Ste. 300

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80329.C32307

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

FOR LINE NUMBER: PAGE 55 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

APWU COPA

Mailing Address American Postal Workers Union, AFL  
1300 L Street NWCity State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 80408.C32680

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Armenian National Committee PAC

Mailing Address 104 N. Belmont Street, Ste. 200B

City State Zip Code  
Glendale CA 91206FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80408.C32675

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Campaign for Working Families

Mailing Address 2800 S. Shirlington Road, Ste. 930

City State Zip Code  
Arlington VA 22206FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80331.C32623

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4750.00

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

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

FOR LINE NUMBER: PAGE 56 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Friends of Jim Saxton

Mailing Address PO Box 795

City

Mount Holly

State

NJ

Zip Code

08060-0795

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	8

Transaction ID: 80318.C31795

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

Friends of Kevin Meara for Council

Mailing Address 14 Tea Rose Lane

City

Hamilton

State

NJ

Zip Code

08620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 80329.C32309

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

Friends of Tom Powers

Mailing Address c/o Edward Loud  
2537 Morningstar Road

City

Manasquan

State

NJ

Zip Code

08736-2221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Acceptable Funds

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	8

Transaction ID: 80320.C31815

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

FOR LINE NUMBER: PAGE 57 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Gopac America

Mailing Address PO Box 365

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 80331.C32607

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

Independent Insurance &amp; Brokers of America Inc

Mailing Address InsurPac  
412 First Street SE, Ste 300

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80408.C32678

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

Keystone Leadership PAC

Mailing Address 1017 N. Elbow Lane

City

Yardley

State

PA

Zip Code

19067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

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

Transaction ID: 80331.C32595

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1350.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 96

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Kirkpatrick & Lockhart Preston Gates Ellis LLP

Mailing Address Political Action Committee  
1601 K Street NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80331.C32619

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Laborers Political League

Mailing Address 905 16th Street NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 80329.C32308

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Marks For Congress

Mailing Address 23 Greensview Drive

City State Zip Code  
Scotch Plains NJ 07076

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80329.C32303

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6200.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 96

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Mike PAC

Mailing Address PO Box 2485

City

Springfield

State

VA

Zip Code

22152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 80126.C31110

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Natl Air Traffic Controllers Assn. PAC

Mailing Address 1325 Massachusetts Avenue, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 9 / 2 0 0 8

Transaction ID: 80320.C31819

Amount of Each Receipt this Period

4000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Natl Assn of Letter Carriers AFL-CIO

Mailing Address 100 Indiana Avenue, N.W.

City

Washington

State

DC

Zip Code

20001-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 80331.C32600

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 96

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

New Jersey Right To Life PAC

Mailing Address Att: Marie Tasy

242 Old New Brunswick Road

City

State

Zip Code

Piscataway

NJ

08854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5100.00

Date of Receipt

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

Transaction ID: 80329.C32324

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Service Employees Intl Union

Mailing Address SEIU COPE Fund

1313 L Street NW

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 8

Transaction ID: 80318.C31313

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Susan B. Anthony List Candidate Fund

Mailing Address 1800 North Kent Street, Suite 1070

City

State

Zip Code

Arlington

VA

22209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 80331.C32622

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

7100.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 96

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

The NEA Fund for Children & Public Education

Mailing Address 1201 16th Street NW, Suite 420

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 80329.C32306

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

US Cuba Democracy PAC

Mailing Address 1200 W. 49th Street

City

Hialeah

State

FL

Zip Code

33012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 80111.C30538

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

US Cuba Democracy PAC

Mailing Address 1200 W. 49th Street

City

Hialeah

State

FL

Zip Code

33012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: 80408.C32681

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6200.00

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

36800.00

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

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

FOR LINE NUMBER: PAGE 62 / 96

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6968.76

Date of Receipt

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

Transaction ID: 80318.C31778

Amount of Each Receipt this Period

160.55

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7590.59

Date of Receipt

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

Transaction ID: 80318.C31779

Amount of Each Receipt this Period

621.83

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7649.05

Date of Receipt

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

Transaction ID: 80318.C31780

Amount of Each Receipt this Period

58.46

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

840.84

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

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

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

FOR LINE NUMBER: PAGE 63 / 96

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8171.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 8

Transaction ID: 80412.C33755

Amount of Each Receipt this Period

521.99

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City

Robbinsville

State

NJ

Zip Code

08691-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8235.41

Date of Receipt

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

Transaction ID: 80412.C33756

Amount of Each Receipt this Period

64.37

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

586.36

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

1427.20

# **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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

New Jersey Right To Life PAC

Mailing Address Att: Marie Tasy  
242 Old New Brunswick Road

City State Zip Code  
Piscataway NJ 08854-

Purpose of Disbursement  
ad journal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3669

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AD JOURNAL

**B.**

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City State Zip Code  
Chantilly VA 20151-

Purpose of Disbursement  
merchant fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80404.E3787

Date of Disbursement

/   /

Amount of Each Disbursement this Period

373.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT FEES

**C.**

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City State Zip Code  
Chantilly VA 20151-

Purpose of Disbursement  
merchant fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80413.E3800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT FEE

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

734.42

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

United Bank

Mailing Address 4501 Daly Drive

City  
Chantilly

State  
VA

Zip Code  
20151-

Purpose of Disbursement  
merchant fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80413.E3801

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**MERCHANT FEE**

**B.**

Full Name (Last, First, Middle Initial)

Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City  
Woodbridge

State  
VA

Zip Code  
22191-

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1533.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PRINTING**

**C.**

Full Name (Last, First, Middle Initial)

Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City  
Woodbridge

State  
VA

Zip Code  
22191-

Purpose of Disbursement  
postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80404.E3784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11659.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**POSTAGE**

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

13208.55

**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)

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80404.E3785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2421.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**B.**

Full Name (Last, First, Middle Initial)

Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80404.E3786

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2662.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**C.**

Full Name (Last, First, Middle Initial)

Allied Printing Resources

Mailing Address 33 Commerce Road

City Carlstadt State NJ Zip Code 07072-

Purpose of Disbursement  
printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

538.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

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

5621.76

**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:  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Direct Impressions

Mailing Address 2100 Tomlynn Street

City Richmond State VA Zip Code 23230-

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 80318.E3746

Date of Disbursement

01 / 04 / 2008

Amount of Each Disbursement this Period

1216.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**B.**

Full Name (Last, First, Middle Initial)

Direct Impressions

Mailing Address 2100 Tomlynn Street

City Richmond State VA Zip Code 23230-

Purpose of Disbursement  
printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 80318.E3747

Date of Disbursement

01 / 17 / 2008

Amount of Each Disbursement this Period

311.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**C.**

Full Name (Last, First, Middle Initial)

HSP Direct, LLC

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
creative development

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 80318.E3749

Date of Disbursement

01 / 04 / 2008

Amount of Each Disbursement this Period

2751.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREATIVE DEVELOPMENT

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

4278.75

**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:  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

HSP Direct, LLC

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
creative development

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 80318.E3750

Date of Disbursement

/   /

Amount of Each Disbursement this Period

601.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREATIVE DEVELOPMENT

**B.**

Full Name (Last, First, Middle Initial)

Kenmore Envelope Company, Inc.

Mailing Address 4641 International Trade Court

City Richmond State VA Zip Code 23231-2900

Purpose of Disbursement  
printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 80318.E3751

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1076.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**C.**

Full Name (Last, First, Middle Initial)

Nova List Company

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
list rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 80318.E3752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4722.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LIST RENTAL

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

6400.58

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Sunrise Data Services

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
data services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3753

Date of Disbursement

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

Amount of Each Disbursement this Period

412.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

DATA SERVICES

**B.**

Full Name (Last, First, Middle Initial)

Sunrise Data Services

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
data services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3754

Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

DATA SERVICES

**C.**

Full Name (Last, First, Middle Initial)

Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-

Purpose of Disbursement  
caging/escrow

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3755

Date of Disbursement

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

Amount of Each Disbursement this Period

1097.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAGING/ESCROW

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

1540.28

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:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Washington Intelligence Bureau

Mailing Address 4128 Pepsi Place

City Chantilly State VA Zip Code 20151-

Purpose of Disbursement  
caging/escrow

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80404.E3792

Date of Disbursement

/   /

Amount of Each Disbursement this Period

815.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**CAGING/ESCROW**

**B.** Full Name (Last, First, Middle Initial)  
Applied Tactics

Mailing Address 540-751-1393  
VA

City State Zip Code

Purpose of Disbursement  
On-line donation set up

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

525.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**ON-LINE DONATION SET UP**

**C.** Full Name (Last, First, Middle Initial)  
Friendly Sons of St. Patrick

Mailing Address PO Box 254

City Spring Lake State NJ Zip Code 07762-

Purpose of Disbursement  
Journal Ad

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3723

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**JOURNAL AD**

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

1490.87

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Friendly Sons of St. Patrick

Mailing Address PO Box 254

City  
Spring LakeState  
NJZip Code  
07762-Purpose of Disbursement  
event tix

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80329.E3760

Date of Disbursement

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

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

EVENT TIX

**B.**

Full Name (Last, First, Middle Initial)

Postmaster - Chantilly, VA

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80404.E3793

Date of Disbursement

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

Amount of Each Disbursement this Period

485.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**C.**

Full Name (Last, First, Middle Initial)

Baldassari Regency

Mailing Address 145 Morris Avenue

City  
TrentonState  
NJZip Code  
08611-Purpose of Disbursement  
event catering

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80126.E3693

Date of Disbursement

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

Amount of Each Disbursement this Period

415.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

EVENT CATERING

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

1075.80

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 PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Cablevision of Hamilton

Mailing Address PO Box 371378

City  
PittsburghState  
PAZip Code  
15250-Purpose of Disbursement  
cable modems

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID:** 80122.E3679

Date of Disbursement

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

Amount of Each Disbursement this Period

99.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CABLE MODEMS

**B.**

Full Name (Last, First, Middle Initial)

Cablevision of Hamilton

Mailing Address PO Box 371378

City  
PittsburghState  
PAZip Code  
15250-Purpose of Disbursement  
cable modems

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID:** 80318.E3711

Date of Disbursement

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

Amount of Each Disbursement this Period

99.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CABLE MODEMS

**C.**

Full Name (Last, First, Middle Initial)

Cablevision of Hamilton

Mailing Address PO Box 371378

City  
PittsburghState  
PAZip Code  
15250-Purpose of Disbursement  
cable modems

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼**Transaction ID:** 80318.E3738

Date of Disbursement

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

Amount of Each Disbursement this Period

99.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CABLE MODEMS

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

298.80

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Chase Card Services

Mailing Address PO Box 15153

City  
Wilmington

State  
DE

Zip Code  
19886-

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3685

Date of Disbursement

/   /

Amount of Each Disbursement this Period

422.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

**B.**

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address Reservations

City  
Washington

State  
DC

Zip Code  
20515-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

164.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

**C.**

Full Name (Last, First, Middle Initial)

ExxonMobil

Mailing Address 4558 Kenmore Avenue

City  
Alexandria

State  
VA

Zip Code  
22304-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

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

422.72

**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)

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Shell Oil

Mailing Address Route 33 West

City  
Hamilton Square

State  
NJ

Zip Code  
08690-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80122.E3687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

**B.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address Hamilton Square 670 North Route 33

City  
Hamilton

State  
NJ

Zip Code  
08619-

Purpose of Disbursement  
office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80122.E3686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

51.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

**C.**

Full Name (Last, First, Middle Initial)

Chase Card Services

Mailing Address PO Box 15153

City  
Wilmington

State  
DE

Zip Code  
19886-

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2346.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

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

2346.45

**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:  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

AT&T Wireless

Mailing Address P.O. Box 8220

City  
Aurora

State  
IL

Zip Code  
60572-8220

Purpose of Disbursement  
cell phone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80318.E3721

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

272.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CELL PHONE

**B.**

Full Name (Last, First, Middle Initial)

Amtrak

Mailing Address Reservations

City  
Washington

State  
DC

Zip Code  
20515-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80318.E3718

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

98.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

**C.**

Full Name (Last, First, Middle Initial)

Applied Tactics

Mailing Address 540-751-1393  
VA

City

State

Zip Code

Purpose of Disbursement  
set up email account

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80318.E3720

Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SET UP EMAIL ACCOUNT

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

0.00

**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:  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Circuit City

Mailing Address

City

Coppell

State

TX

Zip Code

75019-

Purpose of Disbursement

purchase laptop

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** 80318.E3722

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1049.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: PURCHASE LAPTOP

**B.**

Full Name (Last, First, Middle Initial)

Postmaster - Trenton

Mailing Address

City

Trenton

State

NJ

Zip Code

08650-9616

Purpose of Disbursement

postage

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** 80318.E3717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

820.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: POSTAGE

**C.**

Full Name (Last, First, Middle Initial)

Shell Oil

Mailing Address Route 33 West

City

Hamilton Square

State

NJ

Zip Code

08690-

Purpose of Disbursement

travel expense

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

**Transaction ID:** 80318.E3719

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.79

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

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

0.00

**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  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Chase Card Services

Mailing Address PO Box 15153

City  
Wilmington

State  
DE

Zip Code  
19886-

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80329.E3765

Date of Disbursement

/   /

Amount of Each Disbursement this Period

693.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

**B.**

Full Name (Last, First, Middle Initial)

Applied Tactics

Mailing Address 540-751-1393  
VA

City

State

Zip Code

Purpose of Disbursement  
email account

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80329.E3767

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: EMAIL ACCOUNT

**C.**

Full Name (Last, First, Middle Initial)

Postmaster - Trenton

Mailing Address

City  
Trenton

State  
NJ

Zip Code  
08650-9616

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80329.E3766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

425.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: POSTAGE

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

693.34

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address Hamilton Square 670 North Route 33

City Hamilton State NJ Zip Code 08619-

Purpose of Disbursement  
office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80329.E3771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

**B.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City Robbinsville State NJ Zip Code 08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80111.E3659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City Robbinsville State NJ Zip Code 08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80130.E3694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

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

1747.78

**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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City  
Robbinsville

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**B.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City  
Robbinsville

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3727

Date of Disbursement

/   /

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**C.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City  
Robbinsville

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

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

2621.67

**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 PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Constance Carey

Mailing Address 21 Devon Court

City Robbinsville State NJ Zip Code 08691-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80329.E3756

Date of Disbursement

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

Amount of Each Disbursement this Period

873.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)

Mr. Larry Clarici

Mailing Address 922 So. Clinton Ave.

City Trenton State NJ Zip Code 08611-

Purpose of Disbursement  
T-shirts printing

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3739

Date of Disbursement

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

Amount of Each Disbursement this Period

293.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

T-SHIRTS PRINTING

**C.**

Full Name (Last, First, Middle Initial)

Friends of Dotties House

Mailing Address 1508 Beaver Dam Road, Ste. 1

City Point Pleasant Bea State NJ Zip Code 08742-

Purpose of Disbursement  
Journal Ad

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80122.E3676

Date of Disbursement

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

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

JOURNAL AD

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

1317.14

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  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address P.O. Box 371461

City  
Pittsburgh

State  
PA

Zip Code  
15250-7461

Purpose of Disbursement  
courier

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3680

Date of Disbursement

/   /

Amount of Each Disbursement this Period

56.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COURIER

**B.**

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address P.O. Box 371461

City  
Pittsburgh

State  
PA

Zip Code  
15250-7461

Purpose of Disbursement  
courier

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80318.E3708

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COURIER

**C.**

Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address P.O. Box 371461

City  
Pittsburgh

State  
PA

Zip Code  
15250-7461

Purpose of Disbursement  
courier

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80329.E3763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COURIER

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

128.30

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
travel expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80122.E3677

Date of Disbursement

01 / 11 / 2008

Amount of Each Disbursement this Period

1070.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**TRAVEL EXPENSE**

**B.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80114.E3660

Date of Disbursement

01 / 14 / 2008

Amount of Each Disbursement this Period

913.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**C.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80130.E3695

Date of Disbursement

01 / 25 / 2008

Amount of Each Disbursement this Period

1652.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

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

3636.43

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3706

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1652.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**B.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3728

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1652.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**C.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1652.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

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

4956.00

**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)

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Martin Gillespie

Mailing Address 124 Harvard Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80329.E3757

Date of Disbursement

03 / 21 / 2008

Amount of Each Disbursement this Period

1652.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL**

**B.**

Full Name (Last, First, Middle Initial)

William Kenny, DMD

Mailing Address 304 White Horse Road

City Hamilton State NJ Zip Code 08610-

Purpose of Disbursement

Rent HQ

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80122.E3670

Date of Disbursement

01 / 21 / 2008

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**RENT HQ**

**C.**

Full Name (Last, First, Middle Initial)

William Kenny, DMD

Mailing Address 304 White Horse Road

City Hamilton State NJ Zip Code 08610-

Purpose of Disbursement

Rent HQ

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3707

Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**RENT HQ**

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

2652.00

**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)

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

William Kenny, DMD

Mailing Address 304 White Horse Road

City  
Hamilton

State  
NJ

Zip Code  
08610-

Purpose of Disbursement  
Rent HQ

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80329.E3764

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT HQ

**B.**

Full Name (Last, First, Middle Initial)

Minuteman Press

Mailing Address 2100 Nottingham Way

City  
Trenton

State  
NJ

Zip Code  
08619-

Purpose of Disbursement  
Printing/mailling NPL & PL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80122.E3678

Date of Disbursement

01 / 11 / 2008

Amount of Each Disbursement this Period

4749.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING/MAILING NPL & PL

**C.**

Full Name (Last, First, Middle Initial)

Minuteman Press

Mailing Address 2100 Nottingham Way

City  
Trenton

State  
NJ

Zip Code  
08619-

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 80318.E3741

Date of Disbursement

03 / 10 / 2008

Amount of Each Disbursement this Period

662.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

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

5911.76

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address PO Box 387 <hr/> City Marlton State NJ Zip Code 08053-0387 <hr/> Purpose of Disbursement Professional Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 80122.E3672 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>117.58</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PROFESSIONAL SERVICES</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	8	/	2	0	0	8	117.58
M	M	/	D	D	/	Y	Y	Y	Y														
0	1	/	0	8	/	2	0	0	8														
117.58																							
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address PO Box 387 <hr/> City Marlton State NJ Zip Code 08053-0387 <hr/> Purpose of Disbursement Workers Comp Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 80122.E3665 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>19.56</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>WORKERS COMP INSURANCE</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	8	19.56
M	M	/	D	D	/	Y	Y	Y	Y														
0	1	/	1	1	/	2	0	0	8														
19.56																							
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex, Inc. <hr/> Mailing Address PO Box 387 <hr/> City Marlton State NJ Zip Code 08053-0387 <hr/> Purpose of Disbursement Payroll taxes impounded Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 80122.E3664 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1329.08</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>PAYROLL TAXES IMPOUNDED</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	1	/	2	0	0	8	1329.08
M	M	/	D	D	/	Y	Y	Y	Y														
0	1	/	1	1	/	2	0	0	8														
1329.08																							

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

1466.22

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex, Inc.	<b>Transaction ID:</b> 80122.E3666 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 0 8</div> </div>
Mailing Address PO Box 387	<b>Amount of Each Disbursement this Period</b> <div>-520.97</div>
City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Payroll taxes adjustment Candidate Name	<b>PAYROLL TAXES ADJUSTMENT</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex, Inc.	<b>Transaction ID:</b> 80122.E3667 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 8 / 2 0 0 8</div> </div>
Mailing Address PO Box 387	<b>Amount of Each Disbursement this Period</b> <div>0.50</div>
City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Workers Comp Insurance Candidate Name	<b>WORKERS COMP INSURANCE</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex, Inc.	<b>Transaction ID:</b> 80130.E3697 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 0 8</div> </div>
Mailing Address PO Box 387	<b>Amount of Each Disbursement this Period</b> <div>15.39</div>
City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Workers Comp Insurance Candidate Name	<b>WORKERS COMP INSURANCE</b>
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) .....

**-505.08**

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Payroll taxes impounded

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80130.E3696

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1329.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL TAXES IMPOUNDED**

**B.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Payroll taxes impounded

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1329.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL TAXES IMPOUNDED**

**C.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Workers Comp Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 80318.E3704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**WORKERS COMP INSURANCE**

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

2677.72

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
MarltonState  
NJZip Code  
08053-0387Purpose of Disbursement  
Professional Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3702

Date of Disbursement

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

Amount of Each Disbursement this Period

188.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PROFESSIONAL SERVICES

**B.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
MarltonState  
NJZip Code  
08053-0387Purpose of Disbursement  
Payroll taxes impounded

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3725

Date of Disbursement

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

Amount of Each Disbursement this Period

1320.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL TAXES IMPOUNDED

**C.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
MarltonState  
NJZip Code  
08053-0387Purpose of Disbursement  
Workers Comp Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3726

Date of Disbursement

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

Amount of Each Disbursement this Period

19.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WORKERS COMP INSURANCE

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

1528.20

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Payroll taxes impounded

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1310.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL TAXES IMPOUNDED**

**B.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Workers Comp Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3732

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**WORKERS COMP INSURANCE**

**C.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Professional Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

124.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PROFESSIONAL SERVICES**

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

1450.73

**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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Payroll taxes impounded

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80329.E3758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1307.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**PAYROLL TAXES IMPOUNDED**

**B.**

Full Name (Last, First, Middle Initial)

Paychex, Inc.

Mailing Address PO Box 387

City  
Marlton

State  
NJ

Zip Code  
08053-0387

Purpose of Disbursement  
Workers Comp Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80329.E3759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**WORKERS COMP INSURANCE**

**C.**

Full Name (Last, First, Middle Initial)

Postmaster--MAIN Route 130

Mailing Address Route 130 South

City  
Trenton

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
BRE annual fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80122.E3674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

725.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**BRE ANNUAL FEES**

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

2052.43

**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  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Postmaster--MAIN Route 130

Mailing Address Route 130 South

City  
Trenton

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
Replenish BRE acct

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80122.E3675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**REPLENISH BRE ACCT**

**B.**

Full Name (Last, First, Middle Initial)

Postmaster--MAIN Route 130

Mailing Address Route 130 South

City  
Trenton

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
mailing postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2817.93

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**MAILING POSTAGE**

**C.**

Full Name (Last, First, Middle Initial)

Postmaster--MAIN Route 130

Mailing Address Route 130 South

City  
Trenton

State  
NJ

Zip Code  
08691-

Purpose of Disbursement  
replenish BRE account

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80329.E3761

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**REPLENISH BRE ACCOUNT**

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

3317.93

**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  
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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Roma Federal Savings Bank

Mailing Address 2300 Route 33

City  
Robbinsville

State  
NJ

Zip Code  
08691-1411

Purpose of Disbursement  
2007 Form 1120-POL taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80318.E3736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

970.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

2007 FORM 1120-POL TAXES

**B.**

Full Name (Last, First, Middle Initial)

Trenton St. Patricks Day Parade Committ

Mailing Address PO Box 9380

City  
Trenton

State  
NJ

Zip Code  
08650-

Purpose of Disbursement  
Journal Ad

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3684

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

JOURNAL AD

**C.**

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 4833

City  
Trenton

State  
NJ

Zip Code  
08650-4833

Purpose of Disbursement  
phone 4755

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 80122.E3682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.71

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE 4755

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

1259.71

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

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

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 4833

City  
Trenton

State  
NJ

Zip Code  
08650-4833

Purpose of Disbursement  
phones 4755/7350

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3710

Date of Disbursement

/   /

Amount of Each Disbursement this Period

292.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONES 4755/7350

**B.**

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 4833

City  
Trenton

State  
NJ

Zip Code  
08650-4833

Purpose of Disbursement  
phones 4755/7350

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80318.E3737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

109.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONES 4755/7350

**C.**

Full Name (Last, First, Middle Initial)

Verizon Campaign

Mailing Address 7821 New Falls Road, Floor 3

City  
Levittown

State  
PA

Zip Code  
19055-

Purpose of Disbursement  
phone deposit

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 80122.E3671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE DEPOSIT

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

802.16

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

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address P.O. Box 17464

City  
BaltimoreState  
MDZip Code  
21297-1464Purpose of Disbursement  
cell 8984

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80122.E3681

Date of Disbursement

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

Amount of Each Disbursement this Period

68.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL 8984

**B.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address P.O. Box 17464

City  
BaltimoreState  
MDZip Code  
21297-1464Purpose of Disbursement  
cell 8984

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80318.E3709

Date of Disbursement

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

Amount of Each Disbursement this Period

67.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL 8984

**C.**

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address P.O. Box 17464

City  
BaltimoreState  
MDZip Code  
21297-1464Purpose of Disbursement  
cell 8984

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 80329.E3762

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	8

Amount of Each Disbursement this Period

68.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL 8984

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

205.02

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

75338.44

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

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for each category of the  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)

Monmouth County Republican Comm

Mailing Address P.O. Box 808  
16 W. Main Street

City Freehold State NJ Zip Code 07728-

Purpose of Disbursement  
PART;Y SUPPORT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 80318.E3714

Date of Disbursement

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

Amount of Each Disbursement this Period

3500.00
---------

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

3500.00

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

3500.00