

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 JUL -7 PM 1:42
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

BELL FOR SENATE

ADDRESS (number and street)

PO BOX 31

Check if different than previously reported. (ACC)

PALISADES PARK

NJ

07650

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00558122

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NJ

00

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

/ /

through

/ /

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 Rich Danker

Signature of Treasurer

Date

/ /

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)

201607070200213541

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 19

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
10	

 /

D	D
01	

 /

Y	Y	Y	Y
2015			

 To:

M	M
12	

 /

D	D
31	

 /

Y	Y	Y	Y
2015			

	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)) ..	6911.07	566349.88
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ..	6911.07	566149.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	8132.95	511383.76
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ..	8132.95	511383.76
8. Cash on Hand at Close of Reporting Period (from Line 27)...	2483.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	15911.63	

For further information contact:

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

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

201607070200212542

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 19

Write or Type Committee Name
BELL FOR SENATE

Report Covering the Period: From:

M	M
10	01

 /

Y	Y	Y	Y
2015			

 To:

M	M
12	31

 /

Y	Y	Y	Y
2015			

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

2250.00

418104.93

(ii) Unitemized.....

4661.07

83019.95

(iii) TOTAL of contributions from individuals .

6911.07

501124.88

(b) Political Party Committees...

0.00

0.00

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

0.00

65225.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

6911.07

566349.88

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

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

250.00

35000.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b))...

250.00

35000.00

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

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.08

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

7161.07

601349.96

201607070200213543

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	8132.95	511383.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	2750.00	35000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	2750.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..	0.00	200.00
(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	200.00
21. OTHER DISBURSEMENTS ..	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	10882.95	546583.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	6205.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7161.07
25. SUBTOTAL (add Line 23 and Line 24) ...	13366.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	10882.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	2483.47

201607070200213544

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

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

FOR LINE NUMBER: PAGE 5 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
Hadley Arkes

Mailing Address **68 Woodside Ave**

City State Zip Code
Amherst MA 01002

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

Name of Employer Occupation
Amherst College Professor

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
500.00

Date of Receipt

12 / 09 / 2015

Transaction ID : **SA11AI.9034**

Amount of Each Receipt this Period

500.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)
Robert Bauman

Mailing Address **6278 N Federal Hwy
#311**

City State Zip Code
Fort Lauderdale FL 33308

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
250.00

Date of Receipt

12 / 23 / 2015

Transaction ID : **SA11AI.9035**

Amount of Each Receipt this Period

250.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)
William Clark

Mailing Address **3716 Maplewood Ave**

City State Zip Code
Dallas TX 75205

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
500.00

Date of Receipt

12 / 31 / 2015

Transaction ID : **SA11AI.9048**

Amount of Each Receipt this Period

500.00

2014 General Debt Retirement

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

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

1250.00

500.00

201607070200213545

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

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

FOR LINE NUMBER: PAGE 6 OF 19

(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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

Georgette Denlinger

A.

Mailing Address 10 Geranium Drive

City State Zip Code
Marlton NJ 08053

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
11 / 03 / 2015

Transaction ID : SA11AI.9031

Amount of Each Receipt this Period

200.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)

David Gosselin

B.

Mailing Address 62 Jordan Rd

City State Zip Code
Willimantic CT 06226

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

Name of Employer Occupation
Self Insurance Sales

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
375.00

Date of Receipt

MM / DD / YYYY
12 / 31 / 2015

Transaction ID : SA11AI.9051

Amount of Each Receipt this Period

125.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)

Richard Kamin

C.

Mailing Address 13 Downstream Dr

City State Zip Code
Flanders NJ 07836

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

Name of Employer Occupation
Kamin Consulting Group Partner

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
325.00

Date of Receipt

MM / DD / YYYY
12 / 23 / 2015

Transaction ID : SA11AI.9036

Amount of Each Receipt this Period

175.00

2014 General Debt Retirement

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

500.00

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

500.00

201607070200213546

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

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

FOR LINE NUMBER: PAGE 7 OF 19

(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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
Gilbert Shelton

A. Mailing Address 18253 Moss Neck Manor Rd

City State Zip Code
Fredericksburg VA 22408

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

Transaction ID : SA11AI.9047

Amount of Each Receipt this Period

500.00

2014 General Debt Retirement

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

--

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

--

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

500.00

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

2250.00

201607070200213547

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

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

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)
JEFFREY BELL

Mailing Address **132 CHRISTIE ST**

City State Zip Code
LEONIA NJ 07605

FEC ID number of contributing federal political committee. **C S8NJ00012**

Name of Employer Occupation
Bell for Senate Candidate

Receipt For: 2014
 Primary General
 Other (specify) Election Cycle-to-Date
4250.00

Date of Receipt

11 / 09 / 2015

Transaction ID : **SA13A.9065**

Amount of Each Receipt this Period

250.00

Loan to Campaign

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

250.00

250.00

201607070200213548

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Adobe		Date of Disbursement MM / DD / YYYY 10 / 19 / 2015
Mailing Address 345 Park Ave		Amount of Each Disbursement this Period 51.04
City San Jose	State CA	
Zip Code 95110		Transaction ID : SB17.9006
Purpose of Disbursement Subscription		
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. AMTG Solutions		Date of Disbursement MM / DD / YYYY 10 / 25 / 2015
Mailing Address 9803 Allenford Circle #301		Amount of Each Disbursement this Period 260.00
City Rockville	State MD	
Zip Code 20850		Transaction ID : SB17.8982
Purpose of Disbursement Website Design		
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. Capital One		Date of Disbursement MM / DD / YYYY 10 / 05 / 2015
Mailing Address PO Box 71083		Amount of Each Disbursement this Period 490.00
City Charlotte	State NC	
Zip Code 28272		Transaction ID : SB17.9009
Purpose of Disbursement Credit Card Payment		
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

SUBTOTAL of Disbursements This Page (optional).....	801.04
TOTAL This Period (last page this line number only).....	

201607070200213549

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 19

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Capital One

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2015

Amount of Each Disbursement this Period

497.00

Transaction ID : SB17.9017

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2015

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.9025

Full Name (Last, First, Middle Initial)

C. Rich Danker

Mailing Address 4390 Lorcom Ln.
Apt 202

City State Zip Code
Arlington VA 22207

Purpose of Disbursement
Management Consulting

001
Category/
Type

Candidate Name
BELL FOR SENATE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2015

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.9004

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

2046.00

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

201607070200213550

**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)

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Rich Danker		Date of Disbursement MM / DD / YYYY 11 / 25 / 2015
Mailing Address 4390 Lorcom Ln. Apt 202		Amount of Each Disbursement this Period 579.35
City Arlington	State VA	
Purpose of Disbursement Management Consulting	Zip Code 22207	Transaction ID : SB17.9018
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. GoDaddy		Date of Disbursement MM / DD / YYYY 10 / 21 / 2015
Mailing Address 14455 N. Hayden Rd Suite 219		Amount of Each Disbursement this Period 13.17
City Scottsdale	State AZ	
Purpose of Disbursement Website	Zip Code 85260	Transaction ID : SB17.8980
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) c. Rao Group		Date of Disbursement MM / DD / YYYY 12 / 01 / 2015
Mailing Address 4020 Amyington Dr		Amount of Each Disbursement this Period 819.20
City Charlotte	State NC	
Purpose of Disbursement Fundraising Consulting	Zip Code 28226	Transaction ID : SB17.9019
Candidate Name BELL FOR SENATE	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

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

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

1411.72

201607070200213551

**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)

<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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial)

A. Rao Group

Mailing Address 4020 Amyington Dr

City Charlotte State NC Zip Code 28226

Purpose of Disbursement
Fundraising Consulting

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

12 / 01 / 2015

Amount of Each Disbursement this Period

731.51

Transaction ID : SB17.9020

Full Name (Last, First, Middle Initial)

B. TCD Compliance

Mailing Address 3365 Cherry Ln
Unit D

City Woodbury State MN Zip Code 55129

Purpose of Disbursement
Accounting and Reporting

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

11 / 20 / 2015

Amount of Each Disbursement this Period

375.00

Transaction ID : SB17.9015

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 360 Broad Ave

City Princeton State NJ Zip Code 07605

Purpose of Disbursement
Direct Mail Postage

001

Candidate Name
BELL FOR SENATE

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement

12 / 04 / 2015

Amount of Each Disbursement this Period

2584.80

Transaction ID : SB17.9022

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

3691.31

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

3691.31

201507090200213552

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

A. Wall Street Journal

Full Name (Last, First, Middle Initial)
Mailing Address 200 Liberty Street

City New York State NY Zip Code 10281

Purpose of Disbursement
Subscription

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2015

Amount of Each Disbursement this Period
103.35

Transaction ID : SB17.9003

B. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Bank Fees

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2015

Amount of Each Disbursement this Period
17.00

Transaction ID : SB17.9002

C. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 2213 North Glebe Road

City Arlington State VA Zip Code 22207

Purpose of Disbursement
Bank Fees

Candidate Name
BELL FOR SENATE

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: NJ District: 00

Date of Disbursement
MM / DD / YYYY
11 / 30 / 2015

Amount of Each Disbursement this Period
17.00

Transaction ID : SB17.9014

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

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

137.35

201607070200213553

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 19			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement MM / DD / YYYY 12 / 31 / 2015
Mailing Address 2213 North Glebe Road		Amount of Each Disbursement this Period 14.00
City Arlington	State VA	
Purpose of Disbursement Bank Fees		Category/ Type 001
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9021
State: NJ	District: 00	

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

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

SUBTOTAL of Disbursements This Page (optional).....	14.00
TOTAL This Period (last page this line number only).....	8101.42

2016070702002135540

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" 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)
BELL FOR SENATE

Full Name (Last, First, Middle Initial) A. JEFFREY BELL		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 07 / 2015
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 2000.00
City LEONIA	State NJ Zip Code 07605	
Purpose of Disbursement Loan Payment		Transaction ID : SB19A.9062
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) B. JEFFREY BELL		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 09 / 2015
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 500.00
City LEONIA	State NJ Zip Code 07605	
Purpose of Disbursement Loan Payment		Transaction ID : SB19A.9063
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. JEFFREY BELL		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 31 / 2015
Mailing Address 132 CHRISTIE ST		Amount of Each Disbursement this Period 250.00
City LEONIA	State NJ Zip Code 07605	
Purpose of Disbursement Loan Payment		Transaction ID : SB19A.9066
Candidate Name BELL FOR SENATE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ	District: 00	

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

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

2750.00
2750.00

201607070200213555

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
13b

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Transaction ID : SC/10.8199

LOAN SOURCE Full Name (Last, First, Middle Initial) [PERSONAL FUNDS]
JEFFREY BELL

Election: 2014
Primary
[X] General
Other (specify)

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2500.00 2500.00 0.00

TERMS Date Incurred Date Due Interest Rate Secured:
02 / 24 / 2015 / / 12/31/2015 / 0.00 % (apr) [X] Yes [] No

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

Table with 4 rows for endorsers/guarantors. Columns include: Full Name (Last, First, Middle Initial), Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, and Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional)... 0.00
TOTALS This Period (last page in this line only)..

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

201607070200213556

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Transaction ID : **SC/10.8296**

LOAN SOURCE Full Name (Last, First, Middle Initial) *PERSONAL FUNDS*
JEFFREY BELL

Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan 1500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1500.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred: M 04 / D 16 / Y 2015
Date Due: M / D / Y 12/31/2015
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)... ▶ 1500.00

TOTALS This Period (last page in this line only) .. ▶ []

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

201607070200213557

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER: (check only one)

13a
13b

NAME OF COMMITTEE (In Full)
BELL FOR SENATE

Transaction ID : SC/10.9065

LOAN SOURCE Full Name (Last, First, Middle Initial)
JEFFREY BELL

Election: 2014
Primary
General
Other (specify)

Mailing Address
132 CHRISTIE ST

City State ZIP Code
LEONIA NJ 07605

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250.00 250.00 0.00

TERMS Date Incurred Date Due Interest Rate Secured:
11/09/2015 M/D/Y 12/31/2015 0.00% (apr) Yes No

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

Table with 4 rows for endorsers/guarantors. Columns include Full Name, Mailing Address, City, State, ZIP Code, Name of Employer, Occupation, and Amount Guaranteed Outstanding.

SUBTOTALS This Period This Page (optional)... 0.00
TOTALS This Period (last page in this line only).. 1500.00

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

201607070200213558

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

BELL FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Capital One

Nature of Debt (Purpose):
Credit Card Debt

Mailing Address PO Box 71083

City State Zip Code
Charlotte NC 28272

Transaction ID : SD10.5743

Outstanding Balance Beginning This Period

11702.79

Amount Incurred This Period

0.00

Payment This Period

2487.00

Outstanding Balance at Close of This Period

9215.79

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Chase

Nature of Debt (Purpose):
Credit Card Debt

Mailing Address PO Box 15123

City State Zip Code
Wilmington DE 19850

Transaction ID : SD10.8167

Outstanding Balance Beginning This Period

5195.84

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5195.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...

14411.63

2) TOTALS This Period (last page this line number) ...

14411.63

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...

1500.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

15911.63

201607070200213559

Faxed
or
Hand Delivered

201607070200213560

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 7-7-16
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

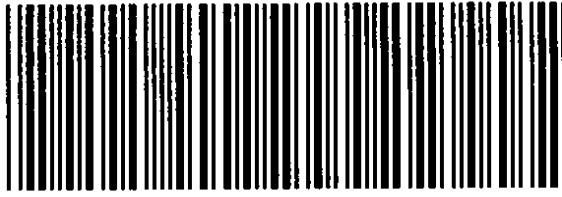
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

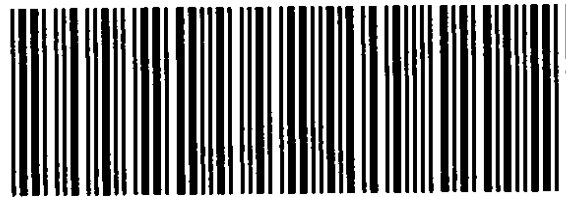
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 7-7-16

201607070200213561



SEN PATCH



SEN PATCH

201607070200213562