

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Dunec for Congress

ADDRESS (number and street)

84 North Mitchel Ave

Check if different  
than previously  
reported. (ACC)

Livingston

NJ

07039

2. FEC IDENTIFICATION NUMBER ▼

C

C00540351

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

NJ

11

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

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2013

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 Gideon R Homa

Signature of Treasurer

Gideon R Homa

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

04

Y Y Y Y

2014

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 / 11

Write or Type Committee Name

Dunec for Congress

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 1 | 3 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 1 | 3 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 6959.00                 | 66191.00                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 6959.00                 | 66191.00                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 8642.57                 | 23456.82                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                               | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 8642.57                 | 23456.82                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | 41959.18                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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 / 11

Write or Type Committee Name

Dunec for Congress

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 1 | 3 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 1 | 3 |

**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).....

6050.00

47503.00

(ii) Unitemized.....

909.00

3188.00

(iii) TOTAL of contributions from individuals ▶

6959.00

50691.00

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

0.00

15500.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

6959.00

66191.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

6959.00

66191.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 11

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 8642.57                       | 23456.82                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 775.00                             |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 8642.57                       | 24231.82                           |

## **III. CASH SUMMARY**

|                                                                                       |          |
|---------------------------------------------------------------------------------------|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 43642.75 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 6959.00  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 50601.75 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 8642.57  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 41959.18 |

**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 11

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**Mark Chertok**

Mailing Address 105 Birch Dr

City

Roslyn

State

NY

Zip Code

11576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FTI Consulting

Occupation

Sr Manager

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 08    |   | 2013        |

Transaction ID : SA11AI.4368

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**Herbert Ford**

Mailing Address 29 Mayhew Dr

City

Livingston

State

NJ

Zip Code

07039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Marcus Brody Ford &amp; Kessler, L

Occupation

Attorney

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 |
| 11    |   | 12    |   | 2013        |

Transaction ID : SA11AI.4387

Amount of Each Receipt this Period

500.00

contribution

Full Name (Last, First, Middle Initial)

**Daniel Gordin**

Mailing Address 101 North Ashby Ave

City

Livingston

State

NJ

Zip Code

07039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Novartis

Occupation

Director

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 04    |   | 2013        |

Transaction ID : SA11AI.4382

Amount of Each Receipt this Period

50.00

Contribution

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

1550.00

**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 6 OF 11

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Dunec for Congress**

|                                                                                                                                               |                                   |                                                          |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Frank P. Patafio</b>                                                                  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>10 / 16 / 2013 |  |
| Mailing Address 283 Noel Street                                                                                                               |                                   | <b>Transaction ID : SA11AI.4391</b>                      |  |
| City<br>Staten Island                                                                                                                         | State<br>NY                       | Zip Code<br>10312                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                               |                                   | Amount of Each Receipt this Period<br>1500.00            |  |
| Name of Employer<br>RXR Realty                                                                                                                | Occupation<br>CIO                 |                                                          |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2000.00 |                                                          |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>Philip Sellinger</b>                                                                  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>12 / 12 / 2013 |  |
| Mailing Address 2 Old Glen Rd                                                                                                                 |                                   | <b>Transaction ID : SA11AI.4378</b>                      |  |
| City<br>Morristown                                                                                                                            | State<br>NJ                       | Zip Code<br>07960                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                               |                                   | Amount of Each Receipt this Period<br>2500.00            |  |
| Name of Employer<br>Greenberg, Traurig, LLP                                                                                                   | Occupation<br>Attorney            |                                                          |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2500.00 |                                                          |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>Steven Sheris</b>                                                                     |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>10 / 09 / 2013 |  |
| Mailing Address 6 Essex Ct                                                                                                                    |                                   | <b>Transaction ID : SA11AI.4394</b>                      |  |
| City<br>Livingston                                                                                                                            | State<br>NJ                       | Zip Code<br>07039                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                               |                                   | Amount of Each Receipt this Period<br>500.00             |  |
| Name of Employer<br>Assoc in Cardiovascular Diseases                                                                                          | Occupation<br>Physician           |                                                          |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00  |                                                          |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....                                                                                         |                                   | 4500.00                                                  |  |
| <b>TOTAL</b> This Period (last page this line number only).....                                                                               |                                   | 6050.00                                                  |  |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 11

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**A. 24-7 Press Release Newswire**

Mailing Address #203 - 901 West 3rd Street

|                      |       |          |
|----------------------|-------|----------|
| City                 | State | Zip Code |
| Vancouver BC V7P 3P9 | ZZ    |          |

Purpose of Disbursement  
Press Release Svc

004

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 478.00 |
|--------|

Transaction ID : SB17.4440

**B. BigHoller.Com**

Mailing Address PO Box 1909

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Livingston | NJ    | 07039    |

Purpose of Disbursement  
ePress Release

004

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 12  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 269.00 |
|--------|

Transaction ID : SB17.4426

**c. Democracy Engine**

Mailing Address 2125 14th Street, NW #101W

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20009    |

Purpose of Disbursement  
Q4 Credit Card Fees

003

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 26  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 188.20 |
|--------|

Transaction ID : SB17.4437

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

935.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**A. Essex County Democratic Committee**

Mailing Address 50 Park Pl # 1430

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 09  |   | 2013    |

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Newark | NJ    | 07102    |

Amount of Each Disbursement this Period

|        |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement  
Annual Dinner

011

Transaction ID : SB17.4401

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**B. FpTP Strategies, LLC**

Mailing Address 148 W 67th St, Apt 3

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 22  |   | 2013    |

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| New York | NY    | 10023    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1400.00 |
|---------|

Purpose of Disbursement  
Consulting Svcs

001

Transaction ID : SB17.4406

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**C. Long Shot Productions**Mailing Address 333 Route 46 West  
Suite 202B

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2013    |

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Fairfield | NJ    | 07004    |

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Purpose of Disbursement  
Video production

004

Transaction ID : SB17.4415

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

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

3600.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**A. Nation Builder**

Mailing Address 448 S. Hill St., Suite 200

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Los Angeles | CA    | 90013    |

Purpose of Disbursement  
Website expenses

003

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ

District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 23  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 92.00 |
|-------|

Transaction ID : SB17.4408

**B. Nation Builder**

Mailing Address 448 S. Hill St., Suite 200

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Los Angeles | CA    | 90013    |

Purpose of Disbursement  
Website expenses

003

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ

District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 25  |   | 2013    |

Amount of Each Disbursement this Period

|       |
|-------|
| 33.00 |
|-------|

Transaction ID : SB17.4425

**C. Nation Builder**

Mailing Address 448 S. Hill St., Suite 200

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Los Angeles | CA    | 90013    |

Purpose of Disbursement  
Website expenses

003

Category/  
Type

Candidate Name

**Dunec for Congress**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ

District: 11

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 23  |   | 2013    |

Amount of Each Disbursement this Period

|        |
|--------|
| 113.00 |
|--------|

Transaction ID : SB17.4433

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

238.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)  
**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**A. NPJ Printing**

Mailing Address 159 Custer Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 17  |   | 2013    |

City Jersey City State NJ Zip Code 07305

Amount of Each Disbursement this Period

Purpose of Disbursement  
Printing Expense

007

295.00

Transaction ID : SB17.4438

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**B. Sheraton Hotels & Resorts**

Mailing Address 199 Smith Rd.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 17  |   | 2013    |

City Parsippany State NJ Zip Code 07054

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Event

007

937.53

Transaction ID : SB17.4417

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

Full Name (Last, First, Middle Initial)

**c. Jacob Zychick**

Mailing Address 656 Day Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 13  |   | 2013    |

City Ridgefield State NJ Zip Code 07657

Amount of Each Disbursement this Period

Purpose of Disbursement  
Consulting Svcs

001

1000.00

Transaction ID : SB17.4430

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ District: 11

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

2232.53

**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)

PAGE 11 OF 11

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**Dunec for Congress**

Full Name (Last, First, Middle Initial)

**A. Jacob Zychick**

Mailing Address 656 Day Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 27  |   | 2013    |

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Ridgefield | NJ    | 07657    |

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement  
Consulting Svcs

001

Transaction ID : SB17.4432

Candidate Name

**Dunec for Congress**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NJ

District: 11

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

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

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

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

1000.00

8005.73