

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) One Johnson & Johnson Plaza
 Check if different than previously reported. (ACC)
New Brunswick NJ 08933

2. **FEC IDENTIFICATION NUMBER** C00010983
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 01 31 2010

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 Mr. Donald W. Bohn

Signature of Treasurer Electronically Filed by Mr. Donald W. Bohn Date 02 23 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Johnson & Johnson Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		160073.86
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	160073.86									
(c) Total Receipts (from Line 19)	43477.21	43477.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	203551.07	203551.07								
7. Total Disbursements (from Line 31)	69350.00	69350.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	134201.07	134201.07								
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)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Johnson & Johnson Political Action Committee

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	5704.00	5704.00
(ii) Unitemized	37773.21	37773.21
(iii) TOTAL (add Lines 11(a)(i) and (ii)	43477.21	43477.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	43477.21	43477.21
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	43477.21	43477.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43477.21	43477.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59000.00	59000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	600.00	600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	600.00	600.00
29. Other Disbursements.....	9750.00	9750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	69350.00	69350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69350.00	69350.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	43477.21	43477.21
34. Total Contribution Refunds (from Line 28(d))	600.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42877.21	42877.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) KIRSTEN HODGKINS		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 45 BRYANT STREET		Transaction ID: 3563153
	City N DARTMOUTH	State MA	Zip Code 02747-2807
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
	Name of Employer J&J Health Care Systems I	Occupation SUPERVISOR CUSTOMER SUPPORT	[MEMO ITEM] Refund(s) on Schedule B Totaling \$600.00 This changes the YTD Total to \$-2-00.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -200.00		

B.	Full Name (Last, First, Middle Initial) COLLEEN A GOGGINS		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 1 JOHNSON & JOHNSON PLAZA WT 901		Transaction ID: PR20569023702
	City NEW BRUNSWICK	State NJ	Zip Code 08933-0001
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.00
	Name of Employer Johnson & Johnson	Occupation WWC CONS GRP OF COMPANIES	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.00		

C.	Full Name (Last, First, Middle Initial) WILLIAM C WELDON		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 515 WATERVIEW PLAGE		Transaction ID: PR20575553702
	City NEW HOPE	State PA	Zip Code 18938-2257
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.00
	Name of Employer Johnson & Johnson	Occupation CHAIR BD/CEO/CHAIR EC	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.00		

SUBTOTAL of Receipts This Page (optional)	768.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A. Full Name (Last, First, Middle Initial)
NICHOLAS VALERIANI

Mailing Address 3 WATER'S EDGE ROAD

City State Zip Code
MORRISTOWN NJ 07960-3358

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Johnson & Johnson CGC OCD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 31 / 2010

Transaction ID: PR20575823702

Amount of Each Receipt this Period 384.00

P/R Deduction (\$192.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MARGARET E HELMS

Mailing Address 12 POLING FARM COURT

City State Zip Code
BELLE MEAD NJ 08502-5540

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Ethicon, Inc. DIR NEW BUS DEV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt 01 / 31 / 2010

Transaction ID: PR20590343702

Amount of Each Receipt this Period 570.00

P/R Deduction (\$285.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
CLIFFORD E HOLLAND

Mailing Address 18 WILLOWBROOK LANE

City State Zip Code
ANNANDALE NJ 08801-3429

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Johnson & Johnson Service CORPORATE VP GVT AFFS POLICY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 01 / 31 / 2010

Transaction ID: PR20590963702

Amount of Each Receipt this Period 384.00

P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) 1338.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.

Full Name (Last, First, Middle Initial)
ALEX GORSKY

Mailing Address 5650 FOX VALLEY DRIVE

City State Zip Code
DOYLESTOWN PA 18902-9431

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

Name of Employer Johnson & Johnson Occupation WWC MD&D EC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: PR20598273702

Amount of Each Receipt this Period
230.00

P/R Deduction (\$115.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
MICHAEL P REILLY

Mailing Address 327 Jefferson Rd

City State Zip Code
Princeton NJ 08540-3414

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

Name of Employer Johnson & Johnson Occupation VP TAXATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: PR20607323702

Amount of Each Receipt this Period
250.00

P/R Deduction (\$125.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
DONALD M CASEY JR

Mailing Address 809 PLYMOUTH ROAD

City State Zip Code
LOWER GWYNEDD PA 19002-1936

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

Name of Employer Johnson & Johnson Occupation WW CHAIR COMPR CARE EC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 1 0

Transaction ID: PR20620193702

Amount of Each Receipt this Period
384.00

P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **864.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) PATRICK D MUTCHLER	Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 1039 LINDSAY LANE	Transaction ID: PR20645073702
	City State Zip Code JENKINTOWN PA 19046-1728	Amount of Each Receipt this Period 384.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Johnson & Johnson Occupation CO GROUP CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 384.00	P/R Deduction (\$192.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) SHERILYN S MCCOY	Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 48 SOUTHERN HILLS DRIVE	Transaction ID: PR20656963702
	City State Zip Code SKILLMAN NJ 08558-2378	Amount of Each Receipt this Period 384.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Johnson & Johnson Occupation WWC PHARM GROUP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 384.00	P/R Deduction (\$192.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) EMILY J PODESTA-BRAYTON	Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 188 SINGER LANE	Transaction ID: PR20871673702
	City State Zip Code FOLSOM CA 95630-5292	Amount of Each Receipt this Period 268.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ortho-McNeil-JanssenPharm Occupation SR EXEC SALES REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 268.00	P/R Deduction (\$134.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	1036.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) KIRSTEN HODGKINS		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 45 BRYANT STREET		Transaction ID: PR21077273702
	City N DARTMOUTH	State MA	Zip Code 02747-2807
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
	Name of Employer J&J Health Care Systems I	Occupation SUPERVISOR CUSTOMER SUPPORT	P/R Deduction (\$200.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -200.00		

B.	Full Name (Last, First, Middle Initial) GARRY A NEIL		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 116 MUIRFIELD COURT		Transaction ID: PR21200703702
	City NEW HOPE	State PA	Zip Code 18938-1297
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230.00
	Name of Employer Johnson & Johnson Service	Occupation CORPORATE VICE PRESIDENT	P/R Deduction (\$115.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

C.	Full Name (Last, First, Middle Initial) DOMINIC J CARUSO		Date of Receipt MM / DD / YYYY 01 / 31 / 2010
	Mailing Address 105 ARBORESQUE DRIVE		Transaction ID: PR31551553702
	City NEW HOPE	State PA	Zip Code 18938-5825
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.00
	Name of Employer Johnson & Johnson	Occupation CORPORATE VP FINANCE CFO	P/R Deduction (\$192.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.00		

SUBTOTAL of Receipts This Page (optional)	▶	1014.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) BRIDGETTE HELLER		Date of Receipt
	Mailing Address 4553 Province Line		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Princeton	NJ	08540-2219
	FEC ID number of contributing federal political committee.		Transaction ID: PR34028783702
Name of Employer McNeil Nutritionals, LLC		Occupation WW PRESIDENT NUTRITIONALS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
		<input type="text" value="300.00"/>	P/R Deduction (\$150.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) BENJAMIN L KOZUB		Date of Receipt
	Mailing Address 17 Washington Park		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Maplewood	NJ	07040-1033
	FEC ID number of contributing federal political committee.		Transaction ID: PR45488383702
Name of Employer Centocor Ortho Biotech In		Occupation PRODUCT DIR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="384.00"/>
		<input type="text" value="384.00"/>	P/R Deduction (\$192.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="684.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5704.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kentucky House Democratic Caucus Campaign Committee	Transaction ID: 3530377 Date of Disbursement
	Mailing Address PO Box 4204	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Frankfort State KY Zip Code 40604	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	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.	Full Name (Last, First, Middle Initial) Beshear/Abramson 2011	Transaction ID: 3530379 Date of Disbursement
	Mailing Address PO Box 4227	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Frankfort State KY Zip Code 40604	Amount of Each Disbursement this Period
	Purpose of Disbursement Steve Beshear, GOVERNOR KY	<input type="text" value="500.00"/>
	Candidate Name Steve Beshear	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Steve Beshear, GOVERNOR KY

C.	Full Name (Last, First, Middle Initial) Tan Parker Campaign	Transaction ID: 3534003 Date of Disbursement
	Mailing Address PO Box 271741	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Flower Mound State TX Zip Code 75027	Amount of Each Disbursement this Period
	Purpose of Disbursement Tan Parker, STATE HOUSE 63rd TX	<input type="text" value="500.00"/>
	Candidate Name TX Rep. Tan Parker	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 63	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Tan Parker, STATE HOUSE 63rd TX

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Auffet for State House 86	Transaction ID: 3534004 Date of Disbursement 01 / 15 / 2010
	Mailing Address: Route 2 Box 2075	Amount of Each Disbursement this Period 250.00
	City: Stillwell State: OK Zip Code: 74960	
	Purpose of Disbursement: John Auffet, STATE HOUSE 86th OK Candidate Name: OK Rep. John Auffet Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 86	011 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	John Auffet, STATE HOUSE 86th OK

B.	Full Name (Last, First, Middle Initial) Representative Jessica Farrar Campaign	Transaction ID: 3534005 Date of Disbursement 01 / 15 / 2010
	Mailing Address: PO Box 30099	Amount of Each Disbursement this Period 500.00
	City: Houston State: TX Zip Code: 77249	
	Purpose of Disbursement: Jessica Farrar, STATE HOUSE 148th TX Candidate Name: Representa Jessica Farrar Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 48	011 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Jessica Farrar, STATE HOU-SE 148th TX

C.	Full Name (Last, First, Middle Initial) New Jersey Democratic State Committee - Federal Account	Transaction ID: 3534007 Date of Disbursement 01 / 15 / 2010
	Mailing Address: 196 West State Street	Amount of Each Disbursement this Period 2500.00
	City: Trenton State: NJ Zip Code: 08608	
	Purpose of Disbursement: Candidate Name: Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) Carlos I. Uresti Campaign	Transaction ID: 3534008 Date of Disbursement 01 / 15 / 2010
	Mailing Address 924 McCullough	Amount of Each Disbursement this Period 2500.00
	City San Antonio State TX Zip Code 78215	
	Purpose of Disbursement Carlos Uresti, STATE HOUSE 118th TX Candidate Name Representa Carlos Uresti Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Carlos Uresti, STATE HOUSE 118th TX

B.	Full Name (Last, First, Middle Initial) Friends of Bob Mensch	Transaction ID: 3534985 Date of Disbursement 01 / 22 / 2010
	Mailing Address c/o Arena Strategies 769 S. 17th Street	Amount of Each Disbursement this Period 500.00
	City Philadelphia State PA Zip Code 19146	
	Purpose of Disbursement Bob Mensch, STATE SENATE 24th PA Candidate Name PA Rep. Bob Mensch Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Bob Mensch, STATE SENATE 24th PA

C.	Full Name (Last, First, Middle Initial) Friends of Dominic Pileggi	Transaction ID: 3534986 Date of Disbursement 01 / 22 / 2010
	Mailing Address 323 W. Front Street	Amount of Each Disbursement this Period 1000.00
	City Media State PA Zip Code 19063	
	Purpose of Disbursement Dominic Pileggi, STATE SENATE 9th PA Candidate Name PA Sen. Dominic Pileggi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Dominic Pileggi, STATE SE- NATE 9th PA

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson & Johnson Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends of Joe Scarnati

Transaction ID: 3534987

Date of Disbursement

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

Mailing Address C/o Amy Dininny
PO Box 33

City Youngsville State PA Zip Code 16371

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Joseph Scarnati, STATE SENATE 25th PA

011
Category/ Type

Candidate Name
Senator Joseph Scarnati, III

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Joseph Scarnati, STATE SE-
NATE 25th PA

State: PA District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

9750.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A. Full Name (Last, First, Middle Initial) NRCC Mailing Address City Washington State DC Zip Code Purpose of Disbursement Candidate Name 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) ▼	Transaction ID: 3530383 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 15000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:

B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address Attn: Sara Conrad 499 South Capitol St SW City Washington State DC Zip Code 20003 Purpose of Disbursement Candidate Name 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) ▼	Transaction ID: 3530385 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 15000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:

C. Full Name (Last, First, Middle Initial) Republican Main Street Partnership PAC Mailing Address City Washington State DC Zip Code Purpose of Disbursement Candidate Name 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) ▼	Transaction ID: 3530386 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	35000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) New Democrat Coalition PAC Mailing Address 607- 14th Street NW Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement 011 Candidate Name New Democrat Coalition PAC 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:	Transaction ID: 3530387 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0 Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) The Blue Dog PAC Mailing Address 236 Massachussets Ave, NE Suite 508 City Washington State DC Zip Code 20002 Purpose of Disbursement 011 Candidate Name The Blue Dog PAC 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:	Transaction ID: 3530388 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0 Amount of Each Disbursement this Period 5000.00
C.	Full Name (Last, First, Middle Initial) Steve Austria For Congress Mailing Address 20 S Limestone St Suite 390 City Springfield State OH Zip Code 45502 Purpose of Disbursement 011 Candidate Name Rep. Steve Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 07	Transaction ID: 3530389 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Dave Wu For Us Congress</p> <p>Mailing Address 818 Sw Third Ave. #1182</p> <p>City Portland State OR Zip Code 97204</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. David Wu</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 01</p>	<p>Transaction ID: 3530391 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Diana Degette For Congress Inc.</p> <p>Mailing Address P.O. Box 61337</p> <p>City Denver State CO Zip Code 80206</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Diana DeGette</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 01</p>	<p>Transaction ID: 3534990 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Rush Holt For Congress</p> <p>Mailing Address PO Box 782</p> <p>City Pennington State NJ Zip Code 08534</p> <p>Purpose of Disbursement 011 Category/Type</p> <p>Candidate Name Rep. Rush D. Holt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 12</p>	<p>Transaction ID: 3534991 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) Committee To Elect Alan Grayson	Transaction ID: 3534992 Date of Disbursement
	Mailing Address PO Box 536447	<input type="text" value="01"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Orlando State FL Zip Code 32853	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Mr. Alan Grayson	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hastings For Congress	Transaction ID: 3534993 Date of Disbursement
	Mailing Address P.O. Box 100277	<input type="text" value="01"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Ft. Lauderdale State FL Zip Code 33310	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Alcee Hastings	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Dan Maffei	Transaction ID: 3534994 Date of Disbursement
	Mailing Address PO Box 74	<input type="text" value="01"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Syracuse State NY Zip Code 13214	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Daniel Maffei	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.	Full Name (Last, First, Middle Initial) First State PAC	Transaction ID: 3534995 Date of Disbursement
	Mailing Address PO Box 2006	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Newport State DE Zip Code 10804	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	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.	Full Name (Last, First, Middle Initial) Melissa Bean For Congress	Transaction ID: 3534996 Date of Disbursement
	Mailing Address PO Box 3068	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Barrington State IL Zip Code 60010	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Melissa L. Bean	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Citizens For Rush	Transaction ID: 3534997 Date of Disbursement
	Mailing Address P. O. Box 7292	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Chicago State IL Zip Code 60680	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Bobby Lee Rush	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson & Johnson Political Action Committee

A.

Full Name (Last, First, Middle Initial)
KIRSTEN HODGKINS

Mailing Address 45 BRYANT STREET

City N DARTMOUTH State MA Zip Code 02747-2807

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

010
Category/
Type

Transaction ID: 3531519
Date of Disbursement

01 / 12 / 2010

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional) ▶

600.00

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

600.00