

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS
For An Authorized Committee

SECRETARY OF THE SENATE

11 JUL 18 AM 10:24

Office Use Only

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

12FE4M5

B e l l for Senate

ADDRESS (number and street)

PO Box 31

Check if different than previously reported. (ACC)

Palisades Park NJ 07650

2. FEC IDENTIFICATION NUMBER ▼

C 00558122

3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
NJ

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 MM/DD/YYYY in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

04 / 01 / 2014 through 06 / 30 / 2014

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 Alfred A. Angelo

Signature of Treasurer

Alfred A. Angelo

Date

07 / 15 / 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									
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FEC FORM 3
(Revised 02/2003)

14020591584

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Bell for Senate

Report Covering the Period: From:

M 04 / D 01 / Y 2014

To:

M 06 / D 30 / Y 2014

	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))..	72,480.00	108,285.00
(b) Total Contribution Refunds (from Line 20(d)) ..		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	72,480.00	108,285.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	140,413.54	158,278.46
(b) Total Offsets to Operating Expenditures (from Line 14)...		
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...		
8. Cash on Hand at Close of Reporting Period (from Line 27)...	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	46,093.33	

For further information contact:

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

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

14020591585

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Bell for Senate

Report Covering the Period: From:

M	M
04	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

 To:

M	M
06	

 /

D	D
30	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

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)...

57,550.00

93,355.00

(ii) Unitemized.....

2,930.00

2,930.00

(iii) TOTAL of contributions from individuals .

60,480.00

96,285.00

(b) Political Party Committees...

2,000.00

2,000.00

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

10,000.00

10,000.00

(d) The Candidate

(e) TOTAL CONTRIBUTIONS (other than loans)

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

72,480.00

108,285.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

13. LOANS:

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

35,000.00

35,000.00

(b) All Other Loans...

(c) TOTAL LOANS

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

35,000.00

35,000.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

.08

.13

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

107,480.08

143,285.13

14020591586

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	140,413.54	158,278.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	5,000.00	5,000.00
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	5,000.00	5,000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ..		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs) ..		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS ..		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	145,413.54	163,278.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	17,940.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	107,480.08
25. SUBTOTAL (add Line 23 and Line 24)...	125,420.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	145,413.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	0.00

14020591587

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

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

FOR LINE NUMBER: PAGE 1 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial)
Tomlinson, Kenneth

Mailing Address
P.O. Box 150A, Springbrook Farm

City **Middleburg** State **VA** Zip Code **20118**

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2014

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Bell, Michael

Mailing Address
2220 NE 44th St.

City **Lighthouse Point** State **FL** Zip Code **33064**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2014

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Smick, David

Mailing Address
220 I St. NE Suite 200

City **Washington** State **DC** Zip Code **20002**

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

Name of Employer **Self-employed** Occupation **Finance**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,600.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2014

Amount of Each Receipt this Period
2,600.00

SUBTOTAL of Receipts This Page (optional)..... **3,200.00**

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

14020591588

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

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

FOR LINE NUMBER: PAGE 2 OF 30
(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)
Hoppe, David

A. Mailing Address 5444 Marstone Ln.

Date of Receipt
MM / DD / YYYY
04 / 23 / 2014

City Fairfax State VA Zip Code 22030

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
750.00

Name of Employer Hoppe Strategies Occupation President

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 750.00

B. Full Name (Last, First, Middle Initial) Jarvis, Robert

Date of Receipt
MM / DD / YYYY
04 / 30 / 2014

Mailing Address 27 E. Sterling Pond

City The Woodlands State TX Zip Code 77382

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
100.00

Name of Employer Occupation

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 100.00

C. Full Name (Last, First, Middle Initial) Aguilar, Alfonso

Date of Receipt
MM / DD / YYYY
05 / 01 / 2014

Mailing Address 79 Swanton Mews, Unit 100

City Gaithersburg State MD Zip Code 20878

FEC ID number of contributing federal political committee. C

Amount of Each Receipt this Period
1000.00

Name of Employer American Principles Project Occupation Policy analyst

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date 1000.00

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

1850.00

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

14020591589

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

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

FOR LINE NUMBER: PAGE 3 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial)
Turner, Douglas

Mailing Address **416 Wolfe St.**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 01 / 2014**

Amount of Each Receipt this Period **1,000.00**

B. Full Name (Last, First, Middle Initial)
Danker, Janet

Mailing Address **PO Box 127**

City **Middleburg** State **VA** Zip Code **22208**

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

Name of Employer Occupation **Homemaker**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 01 / 2014**

Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
Bell, Julia

Mailing Address **218 4th St. SE Apt 2**

City **Washington** State **DC** Zip Code **20003**

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

Name of Employer **Independent Petroleum Association of America** Occupation **Public Affairs**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 02 / 2014**

Amount of Each Receipt this Period **1,000.00**

SUBTOTAL of Receipts This Page (optional)..... **2,250.00**

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

14020591590

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

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

FOR LINE NUMBER: PAGE 4 OF 30

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

Full Name (Last, First, Middle Initial)
Tucker, Chris

A. Mailing Address **1300 F St. NE**
City **Washington** State **DC** Zip Code **20002**

Date of Receipt
M 05 / D 02 / Y 2014

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

Amount of Each Receipt this Period
500.00

Name of Employer **FTI Consulting** Occupation **Managing Director**

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

B. Full Name (Last, First, Middle Initial)
Slingsby, Robert

Date of Receipt
M 05 / D 05 / Y 2014

Mailing Address **9 Valenza Ln.**
City **Blauvelt** State **NY** Zip Code **10913**

Amount of Each Receipt this Period
2,600.00

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

Name of Employer **All Med** Occupation **Chief Executive Officer**

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date **2,600.00**

C. Full Name (Last, First, Middle Initial)
Slingsby, Eileen

Date of Receipt
M 05 / D 05 / Y 2014

Mailing Address **9 Valenza Ln.**
City **Blauvelt** State **NY** Zip Code **10913**

Amount of Each Receipt this Period
2,600.00

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

Name of Employer **All Med** Occupation **President**

Receipt For: Primary General
 Other (specify) Election Cycle-to-Date **2,600.00**

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

5,700.00

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

14020591591

**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 30
(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**

A. Full Name (Last, First, Middle Initial) **Miller, Mark**

Mailing Address **PO Box 52928**

City **Lafayette** State **LA** Zip Code **70505**

Date of Receipt **05 / 05 / 2014**

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

Amount of Each Receipt this Period **2,600.00**

Name of Employer **Merlin Oil & Gas** Occupation **Owner**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **2,600.00**

B. Full Name (Last, First, Middle Initial) **Ohlhausen, Peter**

Mailing Address **8803 Prudence Dr.**

City **Annandale** State **VA** Zip Code **22003**

Date of Receipt **05 / 05 / 2014**

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

Amount of Each Receipt this Period **1,000**

Name of Employer **Ohlhausen Research** Occupation **Consulting**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **1,1000**

C. Full Name (Last, First, Middle Initial) **Kristol, William**

Mailing Address **5825 Jill Ct.**

City **Mclean** State **VA** Zip Code **22101**

Date of Receipt **05 / 09 / 2014**

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

Amount of Each Receipt this Period **2,600.00**

Name of Employer **Weekly Standard** Occupation **Publishing**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **2,600.00**

SUBTOTAL of Receipts This Page (optional)..... **6,200.00**

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

14020591592

**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 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial)
Fimian, Keith

Mailing Address
3650 Concorde Pkwy. Suite 100

City **Chantilly** State **VA** Zip Code **20151**

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

Name of Employer **US Inspect** Occupation **Owner**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **2,600.00**

Date of Receipt
05 / 13 / 2014

Amount of Each Receipt this Period
2,600.00

B. Full Name (Last, First, Middle Initial)
Schilling, Terry

Mailing Address
1130 Connecticut Ave. Suite 420

City **Washington** State **DC** Zip Code **20036**

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

Name of Employer **American Principles Project** Occupation **Manager**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
05 / 01 / 2014

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Black, Charles

Mailing Address
208 Virginia Ave.

City **Alexandria** State **VA** Zip Code **22302**

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

Name of Employer **Prime Policy Group** Occupation **Consulting**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt
05 / 14 / 2014

Amount of Each Receipt this Period
1,000.00

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

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

3,850.00

14020591593

**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 30
(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) **Schulz, William**

A. Mailing Address **5000 Hawthorne Pl NW**

City **Washington** State **DC** Zip Code **20016**

FEC ID number of contributing federal political committee. **C C003322**

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 15 / 2014**

Amount of Each Receipt this Period **1,000.00**

Full Name (Last, First, Middle Initial) **Dunlop, Becky**

B. Mailing Address **2816 S. Joyce St.**

City **Arlington** State **VA** Zip Code **22202**

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

Name of Employer **Heritage Foundation** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 15 / 2014**

Amount of Each Receipt this Period **1,000.00**

Full Name (Last, First, Middle Initial) **Mitchell, Gerald**

C. Mailing Address **7716 Fairfax Rd.**

City **Bethesda** State **MD** Zip Code **20814**

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

Name of Employer **Stein Mitchell Muse Cipollone & Beato** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 15 / 2014**

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **2,250.00**

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

14020591594

**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 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial)
A. Feldman, Gregory

Mailing Address
P.O. Box 7374

City **Watchung** State **NJ** Zip Code **07069**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
05 / 15 / 2014

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Cannon, Francis

Mailing Address **6217 Lee Hwy.**

City **Arlington** State **VA** Zip Code **22207**

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

Name of Employer **American Principles Project** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
05 / 15 / 2014

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Regnery, Alfred

Mailing Address
30 September Song Ln.

City **Washington** State **VA** Zip Code **22747**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
05 / 15 / 2014

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... **700.00**

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

14020591595

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

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

FOR LINE NUMBER: PAGE 9 OF 30
(check only one)

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

Full Name (Last, First, Middle Initial)
A. Dal Col, William

Mailing Address **2528B S. Arlington Mill Rd.**

City **Arlington** State **VA** Zip Code **22208**

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

Name of Employer **Capital Direct** Occupation **Partner**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **2,000.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **2,000.00**

Full Name (Last, First, Middle Initial)
B. Kudlow, Lawrence

Mailing Address **301 Tahmore Drive**

City **Fairfield** State **CT** Zip Code **06825**

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

Name of Employer **Kudlow & Co.** Occupation **Economist**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **1,000.00**

Full Name (Last, First, Middle Initial)
C. Austin, George

Mailing Address **29 Boulder Tr.**

City **Bronxville** State **NY** Zip Code **10708**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **1,000.00**

SUBTOTAL of Receipts This Page (optional)..... **4,000.00**

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

14020591596

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

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

FOR LINE NUMBER: PAGE 10 OF 30
(check only one)

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Kampouris, Emanuelle**

Mailing Address **622 Van Beuren Rd**

City **Morristown** State **NJ** Zip Code **07960**

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

Name of Employer Occupation **Retired**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **1,000.00**

B. Full Name (Last, First, Middle Initial) **Kampouris, Emanuelle**

Mailing Address **622 Van Beuren Rd**

City **Morristown** State **NJ** Zip Code **07960**

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

Name of Employer Occupation **Retired**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **2,000.00**

Date of Receipt

Amount of Each Receipt this Period **1,000.00**

C. Full Name (Last, First, Middle Initial) **Lane, Joseph**

Mailing Address **141 Dans Hwy.**

City **New Caanan** State **CT** Zip Code **06840**

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

Name of Employer Occupation **Retired**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **2,500.00**

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

14020591597

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

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

FOR LINE NUMBER: PAGE **11** OF **30**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Edmonds, Thomas**

Mailing Address **15547 Second Street**

City **Waterford** State **VA** Zip Code **20197**

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

Name of Employer **Edmonds Associates** Occupation **Consultant**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 21 / 2014**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial) **Cannon, John**

Mailing Address **10 Old Jackson Avenue, Unit 49**

City **Hastings-on-Hudson** State **NY** Zip Code **10706**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **1,000.00**

C. Full Name (Last, First, Middle Initial) **Moran, Colin**

Mailing Address **157 E 81st St**

City **New York** State **NY** Zip Code **10028**

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

Name of Employer **Abdiel Capital** Occupation **Managing Partner**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 24 / 2014**

Amount of Each Receipt this Period **1,000.00**

SUBTOTAL of Receipts This Page (optional)..... **2,250.00**

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

14020591598

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

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

FOR LINE NUMBER: PAGE 12 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Giganti, Brian**

Mailing Address **17564 Gatsby Terrace**

City **Olney** State **MD** Zip Code **20832**

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

Name of Employer **Regardie, Brooks & Lewis** Occupation **Certified Public Accountant**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 29 / 2014**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial) **Laffer, Arthur**

Mailing Address **103 Murphy Ct.**

City **Nashville** State **TN** Zip Code **37203**

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

Name of Employer **Laffer Associates** Occupation **Economist**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 27 / 2014**

Amount of Each Receipt this Period **1,000.00**

C. Full Name (Last, First, Middle Initial) **Teague, Randal**

Mailing Address **5902 Mount Eagle Dr., Unit 808**

City **Alexandria** State **VA** Zip Code **22303**

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

Name of Employer **Vorys, Sater, Seymour and Pease** Occupation **Attorney**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 27 / 2014**

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1,500.00**

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

14020591599

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

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

FOR LINE NUMBER: PAGE 13 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Gallagher, Margaret**

Mailing Address **4339 Birchlake Ct**

City **Alexandria** State **VA** Zip Code **22309**

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

Name of Employer **American Principles Project** Occupation **Policy analyst**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05 / 29 / 2014**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial) **Reid, Charles**

Mailing Address **1301 Meadow Lane**

City **Berwyn** State **PA** Zip Code **19312**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05 / 29 / 2014**

Amount of Each Receipt this Period **1,000.00**

C. Full Name (Last, First, Middle Initial) **Heckman, Robert**

Mailing Address **143 Martin Lane**

City **Alexandria** State **VA** Zip Code **22304**

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

Name of Employer **Capital City Partners** Occupation **Consultant**

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 01 / 2015**

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1,500.00**

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

14020591600

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

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

FOR LINE NUMBER: PAGE 14 OF 30

(check only one)

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

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) **Bell for Senate**

Full Name (Last, First, Middle Initial) **Whelan, Stephen**

A. Mailing Address **231 Albany Ave Apt 5**

City **Kingston** State **NY** Zip Code **12401**

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

Name of Employer **Blank Rome** Occupation **Attorney**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 05 / 2014**

Amount of Each Receipt this Period **500.00**

Full Name (Last, First, Middle Initial) **Lehrman, Lewis**

B. Mailing Address **1 Fawcett Pl., Suite 130**

City **Greenwich** State **CT** Zip Code **06831**

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

Name of Employer **L.E. Lehrman & Co.** Occupation **Senior Partner**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **5,200.00**

Date of Receipt **06 / 09 / 2014**

Amount of Each Receipt this Period **2,600.00**

Full Name (Last, First, Middle Initial) **Lehrman, Louise**

C. Mailing Address **1 Fawcett Pl., Suite 130**

City **Greenwich** State **CT** Zip Code **06831**

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

Name of Employer **Five Way Partners** Occupation **Managing Director**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **5,200.00**

Date of Receipt **06 / 09 / 2014**

Amount of Each Receipt this Period **2,600.00**

SUBTOTAL of Receipts This Page (optional)..... **5,700.00**

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

14020591601

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

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

FOR LINE NUMBER: PAGE 15 OF 30
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Simon, William**

Mailing Address **440 Toyopa Dr.**

City **Pacific Palisades** State **CA** Zip Code **90272**

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

Name of Employer **William E. Simon & Sons** Occupation **Owner**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **06 / 09 / 2014**

Amount of Each Receipt this Period **1,000.00**

B. Full Name (Last, First, Middle Initial) **Muma, Kathleen**

Mailing Address **19 Friar Tuck Circle**

City **Summit** State **NJ** Zip Code **07901**

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

Name of Employer Occupation **Homemaker**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt **06 / 13 / 2014**

Amount of Each Receipt this Period **2,600.00**

C. Full Name (Last, First, Middle Initial) **Mumma, William**

Mailing Address **19 Friar Tuck Circle**

City **Summit** State **NJ** Zip Code **07901**

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

Name of Employer **Becket Fund** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt **06 / 13 / 2014**

Amount of Each Receipt this Period **2,600.00**

SUBTOTAL of Receipts This Page (optional)..... **6,200.00**

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

14020591602

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

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

FOR LINE NUMBER: PAGE 16 OF 30

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<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)
A. Smarth, Deborah

Mailing Address
144 Sweetmans Ln.

City **Manalapan** State **NJ** Zip Code **07726**

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

Name of Employer
New Jersey Small Business Development Centers Occupation
Chief Operating Officer

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
06 / 13 / 2014

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Hahn, Douglas

Mailing Address
2150 Broadway, 11th Fl

City **New York** State **NY** Zip Code **10023**

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

Name of Employer
Capital Regional Living Magazine Occupation
Publisher

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
06 / 19 / 2014

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Waters, Susan

Mailing Address
P.O. Box 9

City **Merrifield** State **VA** Zip Code **22118**

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

Name of Employer
National Association of Insurers and Financial Advisors Occupation
CEO

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
06 / 19 / 2014

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... **1,250.00**

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

14020591603

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

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

FOR LINE NUMBER: PAGE 17 OF 30
(check only one)

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Cannon, Francis**

Mailing Address **6217 Lee Hwy.**

City **Arlington** State **VA** Zip Code **22205**

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

Name of Employer **American Principles Project** Occupation **President**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **1,500.00**

Date of Receipt **06 / 20 / 2014**

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial) **Rushton, Sean**

Mailing Address **4847 West Braddock Rd.**

City **Alexandria** State **VA** Zip Code **22311**

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

Name of Employer **United States Congress** Occupation **Staff member**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 20 / 2014**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial) **Ryskind, Allan**

Mailing Address **7111 Marlan Dr.**

City **Alexandria** State **VA** Zip Code **22307**

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

Name of Employer **Human Events** Occupation **Editor**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **06 / 20 / 2014**

Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional)..... **1,300.00**

TOTAL This Period (last page this line number only)..... **1,300.00**

14020591604

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

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

FOR LINE NUMBER: PAGE 18 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Ford, James**

Mailing Address **75 Raritan Rd, Unit 20**

City **Clark** State **NJ** Zip Code **07066**

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

Name of Employer **Waterway New Jersey** Occupation **CEO**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **06 / 25 / 2014**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial) **Derham, Richard**

Mailing Address **524 W Comstock**

City **Seattle** State **WA** Zip Code **98119**

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

Name of Employer Occupation **Retired**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **06 / 27 / 2014**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial) **Angelo, Alfred**

Mailing Address **340 North Avenue E**

City **Cranford** State **NJ** Zip Code

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

Name of Employer **Horizon Partners** Occupation **General Partner**

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **5,200.00**

Date of Receipt **06 / 26 / 2014**

Amount of Each Receipt this Period **2,600.00**

SUBTOTAL of Receipts This Page (optional)..... **3,350.00**

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

14020591605

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

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

FOR LINE NUMBER: PAGE 19 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Agron, Dominick**

Mailing Address **PO Box 10**

City **Dingmans Ferry** State **PA** Zip Code **18328**

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

Name of Employer **Regeneron** Occupation **Treasurer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **06** / **27** / **2014**

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial) **Zarras, Dean**

Mailing Address **12 Old Logging Road**

City **Bedford** State **NY** Zip Code **10506**

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

Name of Employer **Clear Factr** Occupation **Software Designer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **05** / **26** / **2014**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial) **Waters, Matthew**

Mailing Address **211 N. Union St., Suite 100**

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer **The Waters Agency** Occupation **Consultant**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt **06** / **23** / **2014**

Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **1,250.00**

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

14020591606

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **BRUNKENHOEFER, Brett - ActRight check**

Mailing Address **3691 Oak St**

City **Jacksonville** State **FL** Zip Code **32205**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **100.00**

B. Full Name (Last, First, Middle Initial) **KEISLING, JOHN - ActRight check**

Mailing Address **35 Erica Ln**

City **Belen** State **NM** Zip Code **87002**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **25.00**

C. Full Name (Last, First, Middle Initial) **SABELLA, JUDY - ActRight check**

Mailing Address **505 Railroad Blvd**

City **Buena** State **NJ** Zip Code **08310**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **175.00**

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

14020591607

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

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

FOR LINE NUMBER: (check only one)

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

PAGE 21 OF 30

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NAME OF COMMITTEE (In Full) **Bell for Senate**

Full Name (Last, First, Middle Initial) **KRAMER, LINDA - ActRight check**

A. Mailing Address **3716 N. 36th St**

City **Galesburg** State **MI** Zip Code **49053**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **25.00**

Full Name (Last, First, Middle Initial) **HORST, MILTON - ActRight check**

B. Mailing Address **10118 44th Ave. SW**

City **Seattle** State **WA** Zip Code **98146**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **50.00**

Full Name (Last, First, Middle Initial) **CHAN, SHERMAN - ActRight check**

C. Mailing Address **490 Norwood Cir**

City **Santa Clara** State **CA** Zip Code **95051**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **20.00**

Date of Receipt **05 / 23 / 2014**

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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

14020591608

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

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) **Bell for Senate**

Full Name (Last, First, Middle Initial)
A. HARDT, VINEETA - ActRight check

Mailing Address **6614 Central Avenue**
 City **Glendale** State **NY** Zip Code **11385**

Date of Receipt
 M M M / D D / Y Y Y Y
05 / 23 / 2014

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period
10.00

Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
10.00

Full Name (Last, First, Middle Initial)
B. ELACQUA, VAL - ActRight check

Mailing Address **1154 Leeds St**
 City **Utica** State **NY** Zip Code **13501**

Date of Receipt
 M M M / D D / Y Y Y Y
05 / 29 / 2014

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period
25.00

Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
35.00

Full Name (Last, First, Middle Initial)
C. CARVER, DAVE - ActRight check

Mailing Address **29 BELLEAU AVE**
 City **Madison** State **NJ** Zip Code **07940**

Date of Receipt
 M M M / D D / Y Y Y Y
04 / 09 / 2014

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period
50.00

Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify)
 Election Cycle-to-Date
50.00

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

85.00

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

85.00

14020591609

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

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

FOR LINE NUMBER: PAGE 23 OF 30

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **PENNINGTON, CAROLYN - ActRight check**

Mailing Address **233 Hawthorne Lane**

City **Greenwood** State **IN** Zip Code **46142**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial) **HAKE, CHARLES - ActRight check**

Mailing Address **935 S. Moore St**

City **Nashville** State **IL** Zip Code **62263**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **10.00**

C. Full Name (Last, First, Middle Initial) **VAN WAY, CHRIS - ActRight check**

Mailing Address **1608 Gendarme Rd**

City **Carencro** State **LA** Zip Code **70520**

FEC ID number of contributing federal political committee. **C C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **160.00**

TOTAL This Period (last page this line number only)..... **160.00**

14020591610

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

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

FOR LINE NUMBER: PAGE 24 OF 30
(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) **LITTRELL, DONNA - ActRight check**

A. Mailing Address **7450 Deville Court**

City **Indianapolis** State **IN** Zip Code **46256**

Date of Receipt **05 / 12 / 2014**

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period **25.00**

Name of Employer _____ Occupation _____

Receipt For: Primary General
 Other (specify) _____

Election Cycle-to-Date **25.00**

Full Name (Last, First, Middle Initial) **SULLIVAN, JOHN HERBERT - ActRight check**

B. Mailing Address **303 Wyman St**

City **Waltham** State **MA** Zip Code **02114**

Date of Receipt **05 / 12 / 2014**

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period **10.00**

Name of Employer _____ Occupation _____

Receipt For: Primary General
 Other (specify) _____

Election Cycle-to-Date **10.00**

Full Name (Last, First, Middle Initial) **GALUSH, KIMBERLY - Actright check**

C. Mailing Address **36W867 Red Gate Court**

City **St. Charles** State **IL** Zip Code **60175**

Date of Receipt **05 / 12 / 2014**

FEC ID number of contributing federal political committee. **C C00488478**

Amount of Each Receipt this Period **25.00**

Name of Employer _____ Occupation _____

Receipt For: Primary General
 Other (specify) _____

Election Cycle-to-Date **25.00**

SUBTOTAL of Receipts This Page (optional)..... **60.00**

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

14020591611

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

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

FOR LINE NUMBER: PAGE 25 OF 30
(check only one)

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

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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial) **ALLEN, MARK - ActRight check**

A. Mailing Address **4 Lagoon Rd**

City **San Rafael** State **CA** Zip Code **94901**

FEC ID number of contributing federal political committee. **C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **25.00**

Full Name (Last, First, Middle Initial) **NOWAK, MICHAEL - ActRight check**

B. Mailing Address **362 Balsam Street**

City **Brick** State **NJ** Zip Code **08724**

FEC ID number of contributing federal political committee. **C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **25.00**

Full Name (Last, First, Middle Initial) **BROWN, NELSON - ActRight check**

C. Mailing Address **104 Hammock Circle**

City **St. Augustine** State **FL** Zip Code **32084**

FEC ID number of contributing federal political committee. **C00488478**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **100.00**

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

14020591612

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

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

FOR LINE NUMBER: PAGE 26 OF 30

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) **Bell for Senate**

Full Name (Last, First, Middle Initial) **RIEGERT, THOMAS - ActRight check**

A. Mailing Address **16924 Hillard Street**

City **Poolesville** State **MD** Zip Code **20837**

FEC ID number of contributing federal political committee. **C** **C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **25.00**

Full Name (Last, First, Middle Initial) **WORTMAN, WILLIAM - ActRight check**

B. Mailing Address **4736 S. Columbia Pl**

City **Tulsa** State **OK** Zip Code **74105**

FEC ID number of contributing federal political committee. **C** **C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **50.00**

Full Name (Last, First, Middle Initial) **MORRIS, ZACHARY - ActRight check**

C. Mailing Address **330 South Hardy Drive Apt 104**

City **Tempe** State **AZ** Zip Code **85281**

FEC ID number of contributing federal political committee. **C** **C00488478**

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt **05 / 12 / 2014**

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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

14020591613

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

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

FOR LINE NUMBER: PAGE 27 OF 30

(check only one)

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

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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial)
Susan B. Anthony List Candidate Fund

Mailing Address **1707 L St. NW, Suite 505**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C00332296**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,000.00

Date of Receipt
05 / 15 / 2014

Amount of Each Receipt this Period
1,000.00

B. Full Name (Last, First, Middle Initial)
Campaign for Working Families

Mailing Address **2800 S. Shirlington Rd.**

City **Arlington** State **VA** Zip Code **22116**

FEC ID number of contributing federal political committee. **C00325076**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2,500.00

Date of Receipt
05 / 15 / 2014

Amount of Each Receipt this Period
2,500.00

C. Full Name (Last, First, Middle Initial)
Fund to Keep American Number One

Mailing Address **1 Fawcett Pl., Suite 130**

City **Greenwich** State **CT** Zip Code **06831**

FEC ID number of contributing federal political committee. **C00167007**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
5,000.00

Date of Receipt
05 / 27 / 2014

Amount of Each Receipt this Period
5,000.00

SUBTOTAL of Receipts This Page (optional)..... **8,500.00**

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

14020591614

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

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

FOR LINE NUMBER: PAGE 28 OF 30

(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)
Supporting Conservatives of Today and Tomorrow

A. Mailing Address **PO Box 905**

City **Newton** State **NJ** Zip Code **07860**

FEC ID number of contributing federal political committee. **C C00453324**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1,500.00

Date of Receipt
 MM / DD / YYYY
06 / 23 / 2014

Amount of Each Receipt this Period
1,500.00

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
 MM / DD / YYYY
06 / 23 / 2014

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
 MM / DD / YYYY

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....
1,500.00

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

14020591615

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

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

FOR LINE NUMBER: PAGE 29 OF 30
(check only one)

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

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) **Bell for Senate**

Full Name (Last, First, Middle Initial) **Lance for Congress**

A. Mailing Address **P.O Box 225**
City **Colonia, NJ** State **NJ** Zip Code **07067**

FEC ID number of contributing federal political committee. **C C00444224**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **2,000.00**

Date of Receipt **06 / 23 / 2015**

Amount of Each Receipt this Period **2,000.00**

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... **2,000.00**

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

14020591616

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

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

FOR LINE NUMBER: PAGE 30 OF 29

(check only one)

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

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) **Bell for Senate**

Full Name (Last, First, Middle Initial) **Bell, Jeff** **Loan made by candidate**

A. Mailing Address **132 Christie St.**
 City **Leonia, NJ** State **07605** 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 **04 / 28 / 2014**

Amount of Each Receipt this Period **30,000.00**

Full Name (Last, First, Middle Initial) **Bell, Jeff** **Loan made by candidate**

B. Mailing Address **132 Christie St.**
 City **Leonia, NJ** State **07605** 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 **05 / 15 / 2014**

Amount of Each Receipt this Period **5,000.00**

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **35,000.00**

TOTAL This Period (last page this line number only) **104,550.00**

14020591617

**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 1 OF 34

<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

<p>A. Full Name (Last, First, Middle Initial) Howe, Pete</p>		<p>Date of Disbursement</p> <p>04 / 01 / 2014</p>
<p>Mailing Address 38 Parker Rd.</p>		<p>Amount of Each Disbursement this Period</p> <p>3,000.00</p>
<p>City Chester State NJ Zip Code 07930</p>	<p>Purpose of Disbursement Petition drive</p> <p>001</p> <p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	
<p>State: District:</p>		

<p>B. Full Name (Last, First, Middle Initial) Ingram, Gina</p>		<p>Date of Disbursement</p> <p>04 / 01 / 2014</p>
<p>Mailing Address Information requested</p>		<p>Amount of Each Disbursement this Period</p> <p>760.50</p>
<p>City State Zip Code</p>	<p>Purpose of Disbursement Petition drive</p> <p>001</p> <p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	
<p>State: District:</p>		

<p>C. Full Name (Last, First, Middle Initial) Howe, Justin</p>		<p>Date of Disbursement</p> <p>04 / 01 / 2014</p>
<p>Mailing Address 38 Parker Rd.</p>		<p>Amount of Each Disbursement this Period</p> <p>585.00</p>
<p>City Chester State NJ Zip Code 07930</p>	<p>Purpose of Disbursement Petition drive</p> <p>001</p> <p>Category/ Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	
<p>State: District:</p>		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4,345.50

14020591618

**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 2 OF 34

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Howe, Jessie** Date of Disbursement
 M M M / D D / Y Y Y Y
 04 / 01 / 2014

Mailing Address **38 Parker Rd.**

City **Chester** State **NJ** Zip Code **07930**

Purpose of Disbursement **Petition drive** Amount of Each Disbursement this Period
 570.00

Candidate Name **001** Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

B. Full Name (Last, First, Middle Initial) **Bell, James** Date of Disbursement
 M M M / D D / Y Y Y Y
 04 / 07 / 2014

Mailing Address **132 Christie St.**

City **Leonia** State **NJ** Zip Code **07605**

Purpose of Disbursement **Petition drive** Amount of Each Disbursement this Period
 1,400.00

Candidate Name **001** Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

C. Full Name (Last, First, Middle Initial) **Woods, Jonathan** Date of Disbursement
 M M M / D D / Y Y Y Y
 05 / 05 / 2014

Mailing Address **342 4th St., Apt. 5**

City **Jersey City** State **NJ** Zip Code **07302**

Purpose of Disbursement **Petition drive** Amount of Each Disbursement this Period
 570.00

Candidate Name **001** Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 2,540.00

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

14020591619

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
-----------------------------------------------	------------------------------------	-------------------------------------	------------------------------------

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)
Bell for Senate

Full Name (Last, First, Middle Initial) A. Danker, Richard		Date of Disbursement 04 / 04 / 2014
Mailing Address 4390 Lorcom Ln, Apt. 202		Amount of Each Disbursement this Period 3,016.98
City Arlington	State Va Zip Code 22207	
Purpose of Disbursement Salary	001 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) B. Danker, Richard		Date of Disbursement 04 / 22 / 2014
Mailing Address 4390 Lorcom Ln., Apt. 202		Amount of Each Disbursement this Period 3,016.97
City Arlington	State VA Zip Code 22207	
Purpose of Disbursement Salary	001 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. Danker, Richard		Date of Disbursement 05 / 05 / 2014
Mailing Address 4390 Lorcom Ln., Apt. 202		Amount of Each Disbursement this Period 3,016.96
City Arlington	State VA Zip Code 22207	
Purpose of Disbursement Salary	001 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).....

9,050.91

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

14020591620

**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

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) **Bell for Senate**

A. New Jersey Department of Treasury

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: / /

Mailing Address: **50 Barrack St.**

City: **Trenton** State: **NJ** Zip Code: **08695**

Purpose of Disbursement: **Payroll tax** Category/Type:

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Amount of Each Disbursement this Period:

B. New Jersey Department of Treasury

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: / /

Mailing Address: **50 Barrack St.**

City: **Trenton** State: **NJ** Zip Code: **08695**

Purpose of Disbursement: **Payroll tax** Category/Type:

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Amount of Each Disbursement this Period:

C. United States Treasury Department

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: / /

Mailing Address: **1500 Pennsylvania Ave. NW**

City: **Washington** State: **DC** Zip Code: **20220**

Purpose of Disbursement: **Payroll tax** Category/Type:

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

14020591621

**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 5 OF 34

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full) **Bell for Senate**

A. Full Name (Last, First, Middle Initial) **Danker, Richard** Date of Disbursement **05 / 27 / 2014**

Mailing Address **4390 Lorcom Ln, Apt 202**

City **Arlington** State **VA** Zip Code **22207** Amount of Each Disbursement this Period **3,016.98**

Purpose of Disbursement **Salary** Category/Type **001**

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

B. Full Name (Last, First, Middle Initial) **Danker, Richard** Date of Disbursement **06 / 10 / 2014**

Mailing Address **4390 Lorcom Ln, Apt. 202**

City **Arlington** State **VA** Zip Code **22207** Amount of Each Disbursement this Period **\$3,016.97**

Purpose of Disbursement **Salary** Category/Type **001**

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

C. Full Name (Last, First, Middle Initial) **Danker, Richard** Date of Disbursement **06 / 24 / 2014**

Mailing Address **4390 Lorcom Ln, Apt. 202**

City **Arlington** State **VA** Zip Code **22207** Amount of Each Disbursement this Period **3,016.67**

Purpose of Disbursement **Salary** Category/Type **001**

Candidate Name

Office Sought: House Senate President Disbursement For: Primary General Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional) **9,050.62**

TOTAL This Period (last page this line number only)

14020591622

**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. Nationbuilder		Date of Disbursement MM / DD / YYYY 04 / 01 / 2014
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 149.00
City Los Angeles	State CA	
Zip Code 90013		Category/ Type 001
Purpose of Disbursement petition drive		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement MM / DD / YYYY 04 / 02 / 2014
Mailing Address P.O. Box 947		Amount of Each Disbursement this Period 78.50
City American Fork, UT	State UT	
Zip Code 84003		Category/ Type 001
Purpose of Disbursement credit card processing		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Authorize.net		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address P.O. Box 947		Amount of Each Disbursement this Period 78.50
City American Fork, UT	State UT	
Zip Code 84003		Category/ Type 001
Purpose of Disbursement credit card processing		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	306.00
TOTAL This Period (last page this line number only).....	

14020591623

**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)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21
 PAGE 7 OF 34

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Authorize.net** Date of Disbursement
 Mailing Address **PO Box 947** 06 / 03 / 2014
 City **American Fork, UT 84003** State Zip Code
 Purpose of Disbursement **credit card processing** 001
 Candidate Name Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District: Amount of Each Disbursement this Period
47.95

B. Full Name (Last, First, Middle Initial) **Authorize.net** Date of Disbursement
 Mailing Address **PO Box 947** 06 / 17 / 2014
 City **American Fork, UT 84003** State Zip Code
 Purpose of Disbursement **credit card processing** 001
 Candidate Name Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District: Amount of Each Disbursement this Period
82.95

C. Full Name (Last, First, Middle Initial) **Authorize.net** Date of Disbursement
 Mailing Address **PO Box 947** 04 / 02 / 2014
 City **American Fork, UT 84003** State Zip Code
 Purpose of Disbursement **credit card processing** 001
 Candidate Name Category/Type
 Office Sought: House Disbursement For: Primary General
 Senate Other (specify)
 President
 State: District: Amount of Each Disbursement this Period
32.95

SUBTOTAL of Disbursements This Page (optional) **163.85**
TOTAL This Period (last page this line number only)

14020591624

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
-----------------------------------------------	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

A. Authorize.net

Date of Disbursement

Mailing Address

PO Box 947

M M / D D / Y Y Y Y
05 / 05 / 2014

City

American Fork, UT 84003

Amount of Each Disbursement this Period

32.95

Purpose of Disbursement

credit card processing

001

Candidate Name

Category/
Type

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)

B. Authorize.net

Date of Disbursement

Mailing Address

PO Box 947

M M / D D / Y Y Y Y
06 / 02 / 2014

City

American Fork, UT 84003

Amount of Each Disbursement this Period

132.88

Purpose of Disbursement

credit card processing

001

Candidate Name

Category/
Type

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. Authorize.net

Date of Disbursement

Mailing Address

PO Box 947

M M / D D / Y Y Y Y
06 / 03 / 2014

City

American Fork, UT 84003

Amount of Each Disbursement this Period

35.00

Purpose of Disbursement

credit card processing

001

Candidate Name

Category/
Type

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).....

200.83

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

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14020591625

**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 34

<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. Authorize.net

Date of Disbursement

Mailing Address

PO Box 947

MM / DD / YYYY
06 / 04 / 2014

City

State Zip Code

American Fork, UT 84003

Amount of Each Disbursement this Period

Purpose of Disbursement

credit card processing

35.00

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. AMTG Solutions

Date of Disbursement

Mailing Address

9803 Allenford Circle #301

MM / DD / YYYY
04 / 03 / 2014

City

State Zip Code

North Potomac MD 20850

Amount of Each Disbursement this Period

Purpose of Disbursement

website maintenance

325.00

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Mailchimp

Date of Disbursement

Mailing Address

512 Means Street, Suite 404

MM / DD / YYYY
04 / 07 / 2014

City

State Zip Code

Atlanta GA 30318

Amount of Each Disbursement this Period

Purpose of Disbursement

email list storage

50.00

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

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

410.00

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

410.00

14020591626

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Mailchimp

Full Name (Last, First, Middle Initial)

Mailing Address: **512 Means St., Suite 404**

City: **Atlanta GA 30318** State Zip Code

Purpose of Disbursement: **email list storage** Category/Type: **001**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **05 / 05 / 2014**

Amount of Each Disbursement this Period: **50.00**

B. GoDaddy

Full Name (Last, First, Middle Initial)

Mailing Address: **14455 N. Hayden Rd., Ste. 219**

City: **Scottsdale, AZ 85260** State Zip Code

Purpose of Disbursement: **web hosting** Category/Type: **001**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **04 / 21 / 2014**

Amount of Each Disbursement this Period: **8.99**

C. GoDaddy

Full Name (Last, First, Middle Initial)

Mailing Address: **14455 N. Hayden Rd., Ste. 219**

City: **Scottsdale, AZ 85260** State Zip Code

Purpose of Disbursement: **web hosting** Category/Type: **001**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **05 / 20 / 2014**

Amount of Each Disbursement this Period: **8.99**

SUBTOTAL of Disbursements This Page (optional)..... **67.98**

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

14020591627

**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 11 OF 34

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

A.

Full Name (Last, First, Middle Initial) **GoDaddy**

Mailing Address **14455 N. Hayden Rd., Ste. 219**

City **Scottsdale, AZ** State **AZ** Zip Code **85260**

Purpose of Disbursement **web hosting** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 11 / 2014

Amount of Each Disbursement this Period

13.17

Full Name (Last, First, Middle Initial)

B.

Full Name (Last, First, Middle Initial) **GoDaddy**

Mailing Address **14455 N. Hayden Rd., Ste. 219**

City **Scottsdale, AZ** State **AZ** Zip Code **85260**

Purpose of Disbursement **web hosting** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 20 / 2014

Amount of Each Disbursement this Period

8.99

Full Name (Last, First, Middle Initial)

C.

Full Name (Last, First, Middle Initial) **Intuit**

Mailing Address **2632 Marine Way**

City **Mountain View, CA** State **CA** Zip Code **94043**

Purpose of Disbursement **accounting** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 28 / 2014

Amount of Each Disbursement this Period

23.97

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

46.13

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

46.13

14020591628

**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 12 OF 34

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Bell for Senate

Full Name (Last, First, Middle Initial)

A. Intuit

Date of Disbursement

Mailing Address

2632 Marine Way

M 04	D 29	Y 2014
------	------	--------

City

Mountain View, CA 94043

Amount of Each Disbursement this Period

Purpose of Disbursement

payroll processing

44.70

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Intuit

Date of Disbursement

Mailing Address

2632 Marine Way

M 05	D 27	Y 2014
------	------	--------

City

Mountain View, CA 94043

Amount of Each Disbursement this Period

Purpose of Disbursement

accounting

23.97

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Intuit

Date of Disbursement

Mailing Address

2632 Marine Way

M 05	D 28	Y 2014
------	------	--------

City

Mountain View, CA 94043

Amount of Each Disbursement this Period

Purpose of Disbursement

payroll processing

44.70

Candidate Name

001

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

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

113.37

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

14020591629

**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

A. Full Name (Last, First, Middle Initial) **Intuit**

Date of Disbursement: 06 / 04 / 2014

Mailing Address: 2632 Marine Way

City: Mountain View, CA 94043

Purpose of Disbursement: accounting

Candidate Name: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: [] District: []

Amount of Each Disbursement this Period: 35.00

Category/Type: 001

B. Full Name (Last, First, Middle Initial) **Authorize.net**

Date of Disbursement: 06 / 26 / 2014

Mailing Address: PO Box 947

City: American Fork, UT 84003

Purpose of Disbursement: credit card processing

Candidate Name: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: [] District: []

Amount of Each Disbursement this Period: 157.88

Category/Type: 001

C. Full Name (Last, First, Middle Initial) **Intuit**

Date of Disbursement: 06 / 27 / 2014

Mailing Address: 2632 Marine Way

City: Mountain View, CA 94043

Purpose of Disbursement: accounting

Candidate Name: []

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: [] District: []

Amount of Each Disbursement this Period: 44.70

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 237.58

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

14020591630

**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.

Intuit

Date of Disbursement

MM 06	DD 27	YYYY 2014
----------	----------	--------------

Mailing Address

2632 Marine Way

City

State Zip Code

Mountain View, CA 94043

Purpose of Disbursement

accounting

--

Amount of Each Disbursement this Period

23.97

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)

B.

Glenpoint Marriot

Date of Disbursement

MM 05	DD 05	YYYY 2014
----------	----------	--------------

Mailing Address

100 Frank W Burr Blvd

City

State Zip Code

Teaneck, NJ 07666

Purpose of Disbursement

meeting expense

001

Amount of Each Disbursement this Period

28.68

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.

Glenpoint Marriot

Date of Disbursement

MM 05	DD 22	YYYY 2014
----------	----------	--------------

Mailing Address

100 Frank W Burr Blvd

City

State Zip Code

Teaneck, NJ 07666

Purpose of Disbursement

meeting expense

001

Amount of Each Disbursement this Period

22.26

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)

74.91

TOTAL This Period (last page this line number only)

14020591631

**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

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)
Bell for Senate

A.

Full Name (Last, First, Middle Initial) **Glenpointe Marriot**

Date of Disbursement: MM/DD/YYYY **06/12/2014**

Mailing Address **100 Frank Burr Hwy**

City **Teaneck, NJ** State **NJ** Zip Code **07666**

Purpose of Disbursement **meeting expense** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period **8.75**

B.

Full Name (Last, First, Middle Initial) **Glenpointe Marriot**

Date of Disbursement: MM/DD/YYYY **06/12/2014**

Mailing Address **100 Frank Burr Hwy**

City **Teaneck, NJ** State **NJ** Zip Code **07666**

Purpose of Disbursement **meeting expense** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period **28.68**

C.

Full Name (Last, First, Middle Initial) **Glenpointe Marriot**

Date of Disbursement: MM/DD/YYYY **06/12/2014**

Mailing Address **100 Frank Burr Hwy**

City **Teaneck, NJ** State **NJ** Zip Code **07666**

Purpose of Disbursement **meeting expense** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period **58.76**

SUBTOTAL of Disbursements This Page (optional) **96.19**

TOTAL This Period (last page this line number only)

14020591632

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Glenpointe Marriot**

Mailing Address **100 Frank W Burr Blvd**

City **Teaneck, NJ** State Zip Code **07666**

Purpose of Disbursement **meeting expense** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement **06 / 02 / 2014**

Amount of Each Disbursement this Period **10.03**

B. Full Name (Last, First, Middle Initial) **Glenpointe Marriot**

Mailing Address **100 Frank W Burr Blvd**

City **Teaneck, NJ** State Zip Code **07666**

Purpose of Disbursement **meeting expense** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement **06 / 02 / 2014**

Amount of Each Disbursement this Period **34.46**

C. Full Name (Last, First, Middle Initial) **New Jersey Department of Treasury**

Mailing Address **50 Barrack St**

City **Trenton, NJ** State Zip Code **08608**

Purpose of Disbursement **payroll tax** Category/Type **001**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

Date of Disbursement **05 / 27 / 2014**

Amount of Each Disbursement this Period **176.58**

SUBTOTAL of Disbursements This Page (optional) **221.07**

TOTAL This Period (last page this line number only)

14020591633

**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)
 17 18 19a 19b
 20a 20b 20c 21
 PAGE 17 OF 34

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **New Jersey Department of Treasury**

Mailing Address **55 Barrack St**

City **Trenton, NJ** State **08608** Zip Code

Purpose of Disbursement **payroll tax** **001** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement **06 / 25 / 2014**

Amount of Each Disbursement this Period **176.58**

B. Full Name (Last, First, Middle Initial) **U.S. Department of Treasury**

Mailing Address **1500 Pennsylvania Ave. NW**

City **Washington, D.C.** State **20220** Zip Code

Purpose of Disbursement **payroll tax** **001** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement **05 / 28 / 2014**

Amount of Each Disbursement this Period **965.56**

C. Full Name (Last, First, Middle Initial) **U.S. Department of Treasury**

Mailing Address **1500 Pennsylvania Ave. NW**

City **Washington, D.C.** State **20220** Zip Code

Purpose of Disbursement **payroll tax** **001** Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement **06 / 26 / 2014**

Amount of Each Disbursement this Period **965.56**

SUBTOTAL of Disbursements This Page (optional) **2,107.70**

TOTAL This Period (last page this line number only)

14020591634

**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 18 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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 05 / 30 / 2014
Mailing Address 2213 N. Glebe Rd.		Amount of Each Disbursement this Period 40.00
City Arlington, VA	State VA	
Zip Code 22207		Category/ Type 001
Purpose of Disbursement bank fee		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement 06 / 03 / 2014
Mailing Address 2213 N. Glebe Rd.		Amount of Each Disbursement this Period 35.00
City Arlington, VA	State VA	
Zip Code 22207		Category/ Type 001
Purpose of Disbursement bank fee		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Wells Fargo		Date of Disbursement 06 / 04 / 2014
Mailing Address 2213 N. Glebe Rd.		Amount of Each Disbursement this Period 35.00
City Arlington, VA	State VA	
Zip Code 22207		Category/ Type 001
Purpose of Disbursement bank fee		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	110.00
TOTAL This Period (last page this line number only).....	

14020591635

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address: 2213 N. Glebe Rd.

City: Arlington, VA 22207

Purpose of Disbursement: bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 04 / 2014

Amount of Each Disbursement this Period: 35.00

Category/Type: 001

B. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address: 2213 N. Glebe Rd.

City: Arlington, VA 22207

Purpose of Disbursement: bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 09 / 2014

Amount of Each Disbursement this Period: 35.00

Category/Type: 001

C. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address: 2213 N. Glebe Rd.

City: Arlington, VA 22207

Purpose of Disbursement: bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2014

Amount of Each Disbursement this Period: 30.00

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 110.00

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

14020591636

**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

A. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address: 2213 N. Glebe Rd.

City: Arlington, VA 22207 State Zip Code

Purpose of Disbursement: bank fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 40.00

Category/Type: 001

B. Coluccio, Gia

Full Name (Last, First, Middle Initial)

Mailing Address: 1815 S St. NW, Apt. 229

City: Washington, D.C. 20009 State Zip Code

Purpose of Disbursement: consulting fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 3,000.00

Category/Type: 001

C. Woods, Jonathan

Full Name (Last, First, Middle Initial)

Mailing Address: 302 4th St., Apt. 5

City: Jersey City, NJ 07302 State Zip Code

Purpose of Disbursement: petition drive

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 30 / 2014

Amount of Each Disbursement this Period: 570.00

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 3,610.00

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

14020591637

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full) **Bell for Senate**

Full Name (Last, First, Middle Initial) _____

A. Crowne Plaza

Mailing Address **401 S Van Brunt St**

City **Englewood, NJ** State _____ Zip Code **07631**

Purpose of Disbursement **lodging** Category/Type **002**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

Date of Disbursement **05 / 16 / 2014**

Amount of Each Disbursement this Period **171.35**

Full Name (Last, First, Middle Initial) _____

B. Crowne Plaza

Mailing Address **401 S Van Brunt St**

City **Englewood, NJ** State _____ Zip Code **07631**

Purpose of Disbursement **lodging** Category/Type **002**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

Date of Disbursement **05 / 21 / 2014**

Amount of Each Disbursement this Period **219.65**

Full Name (Last, First, Middle Initial) _____

C. Crowne Plaza

Mailing Address **401 S Van Brunt St**

City **Englewood, NJ** State _____ Zip Code **07631**

Purpose of Disbursement **lodging** Category/Type **002**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

Date of Disbursement **05 / 21 / 2014**

Amount of Each Disbursement this Period **219.65**

SUBTOTAL of Disbursements This Page (optional)..... **610.65**

TOTAL This Period (last page this line number only)..... **610.65**

14020591638

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Bell for Senate

A. Full Name (Last, First, Middle Initial) Crowne Plaza		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 401 S Van Brunt St		Amount of Each Disbursement this Period 166.57
City Englewood, NJ 07631	State Zip Code	
Purpose of Disbursement lodging	Category/Type 002	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

B. Full Name (Last, First, Middle Initial) Crowne Plaza		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 401 S Van Brunt St		Amount of Each Disbursement this Period 164.57
City Englewood, NJ 07631	State Zip Code	
Purpose of Disbursement lodging	Category/Type 002	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

C. Full Name (Last, First, Middle Initial) Crowne Plaza		Date of Disbursement MM / DD / YYYY 06 / 06 / 2014
Mailing Address 401 S Brunt St		Amount of Each Disbursement this Period 906.27
City Englewood, NJ 07631	State Zip Code	
Purpose of Disbursement lodging	Category/Type 002	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

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

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

1,237.41

14020591639

**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. Crowne Plaza		Date of Disbursement MM / DD / YYYY 06 / 12 / 2014
Mailing Address 401 S Van Brunt St		Amount of Each Disbursement this Period 163.30
City Englewood, NJ	State Zip Code 07631	
Purpose of Disbursement lodging	Category/Type 002	
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) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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 Zip Code	
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).....	163.30
TOTAL This Period (last page this line number only).....	

14020591640

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial) A. Hotels.com		Date of Disbursement MM / DD / YYYY 05 / 22 / 2014
Mailing Address 5400 LBJ Freeway, Suite 500		Amount of Each Disbursement this Period 227.68
City Dallas, TX 75240	State Zip Code	
Purpose of Disbursement lodging	Category/ Type 002	Amount of Each Disbursement this Period 441.15
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) B. Hotels.com		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address 5400 LBJ Freeway, Suite 500		Amount of Each Disbursement this Period 441.15
City Dallas, TX 75240	State Zip Code	
Purpose of Disbursement	Category/ Type 002	Amount of Each Disbursement this Period 51.03
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. Borgata Hotel		Date of Disbursement MM / DD / YYYY 05 / 30 / 2014
Mailing Address 1 Borgata Way		Amount of Each Disbursement this Period 51.03
City Atlantic City, NJ 08401	State Zip Code	
Purpose of Disbursement lodging	Category/ Type 002	Amount of Each Disbursement this Period 719.86
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).....	719.86
TOTAL This Period (last page this line number only).....	

14020591641

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
-----------------------------------------------	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Borgata Hotel

Full Name (Last, First, Middle Initial)
Mailing Address: **1 Borgata Way**
City: **Atlantic City, NJ 08401** State: **NJ** Zip Code: **08401**

Purpose of Disbursement: **lodging** Category/Type: **002**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **06 / 26 / 2014**

Amount of Each Disbursement this Period: **282.72**

B. Danker, Richard

Full Name (Last, First, Middle Initial)
Mailing Address: **4390 Lorcom Ln, Apt. 202**
City: **Arlingto, VA 22207** State: **VA** Zip Code: **22207**

Purpose of Disbursement: **travel reimbursement** Category/Type: **002**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **06 / 30 / 2014**

Amount of Each Disbursement this Period: **1,619.44**

C. Bell, Jeff

Full Name (Last, First, Middle Initial)
Mailing Address: **132 Christie St.**
City: **Leonia, NJ 07605** State: **NJ** Zip Code: **07605**

Purpose of Disbursement: **travel reimbursement** Category/Type: **002**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

Date of Disbursement: **06 / 10 / 2014**

Amount of Each Disbursement this Period: **1,046.45**

SUBTOTAL of Disbursements This Page (optional)..... **2,948.61**

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

14020591642

**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 26 OF 34

<input 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

A. Full Name (Last, First, Middle Initial)
Hampton Inn

Mailing Address
100 U.S. Route 46

City
Ridgefield Park State **NJ** Zip Code **07660**

Purpose of Disbursement
Lodging Category/Type **002**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
04 / 03 / 2014

Amount of Each Disbursement this Period
418.61

B. Full Name (Last, First, Middle Initial)
Amtrak

Mailing Address
60 Mass. Ave NE

City
Washington, DC 20002 State Zip Code

Purpose of Disbursement
train tickets Category/Type **002**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
06 / 18 / 2014

Amount of Each Disbursement this Period
530.40

C. Full Name (Last, First, Middle Initial)
Hewell, Allegra

Mailing Address
2201 N St. NW, Apt. 401

City
Washington, D.C. 20037 State Zip Code

Purpose of Disbursement
travel reimbursement Category/Type **002**

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
05 / 28 / 2014

Amount of Each Disbursement this Period
770.13

SUBTOTAL of Disbursements This Page (optional)..... **1,719.14**

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

14020591643

**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 27 OF 34

<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. The Lukens Company		Date of Disbursement MM / DD / YYYY 04 / 23 / 2014
Mailing Address 2800 Shirlington Rd.		Amount of Each Disbursement this Period 3,100.00
City Arlington	State Va	
Zip Code 22206		Category/ Type 003
Purpose of Disbursement Direct mail fundraising		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Perceptions Studio		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 4 Northfield Rd.		Amount of Each Disbursement this Period 226.40
City Amherst, NH	State 03031	
Zip Code		Category/ Type 003
Purpose of Disbursement fundraiser invitations		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Morton the Steakhouse		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 1050 Conneticut Ave NW		Amount of Each Disbursement this Period 1,374.91
City Washington, D.C.	State 20036	
Zip Code		Category/ Type 003
Purpose of Disbursement catering		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

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

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

4,701.31

14020591644

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial) JR Cigar		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 1730 L St NW		Amount of Each Disbursement this Period 221.38
City Washington, D.C.	State Zip Code 20036	
Purpose of Disbursement catering	Category/Type 003	
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)		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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)		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
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).....	221.38
TOTAL This Period (last page this line number only).....	

14020591645

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial) **Cornerstone Management Partners**

Date of Disbursement: MM/DD/YYYY **05/28/2014**

Mailing Address: **17 Westminster Gate**

City: **Bergenfield, NJ** State: **NJ** Zip Code: **07621**

Purpose of Disbursement: **robo calls** Category/Type: **004**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period: **8,000.00**

B. Full Name (Last, First, Middle Initial) **Cornerstone Management Partners**

Date of Disbursement: MM/DD/YYYY **06/16/2014**

Mailing Address: **17 Westminster Gate**

City: **Bergenfield, NJ** State: **NJ** Zip Code: **07621**

Purpose of Disbursement: **robo calls** Category/Type: **004**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period: **2,000.00**

C. Full Name (Last, First, Middle Initial) **Elliott Curson Advertising**

Date of Disbursement: MM/DD/YYYY **05/30/2014**

Mailing Address: **1900 Rittenhouse Square**

City: **Philadelphia, PA** State: **PA** Zip Code: **19103**

Purpose of Disbursement: **radio advertising** Category/Type: **004**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period: **5,000.00**

SUBTOTAL of Disbursements This Page (optional) **15,000.00**

TOTAL This Period (last page this line number only)

14020591646

**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 30 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial) A. Elliott Curson Advertising		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 1900 Rittenhouse Square		Amount of Each Disbursement this Period 2,400.00
City Philadelphia, PA	State Zip Code 19101	
Purpose of Disbursement radio advertisement	Category/Type 004	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Cornerstone Management Partners		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 17 Westminster Gate		Amount of Each Disbursement this Period 14,000.00
City Bergenfield, NJ	State Zip Code 07621	
Purpose of Disbursement robo calls	Category/Type 004	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16,400
TOTAL This Period (last page this line number only).....	

14020591647

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)
Bell for Senate

Full Name (Last, First, Middle Initial) A. Gallco Media		Date of Disbursement 05 / 01 / 2014
Mailing Address PO Box 67		Amount of Each Disbursement this Period 350.00
City Belford	State NJ	
Zip Code 07716		Category/ Type 004
Purpose of Disbursement Online advertising		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

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

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

SUBTOTAL of Disbursements This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

14020591648

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

Use separate schedulers for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 17
 18
 19a
 19b
 20a
 20b
 20c
 21

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Cornerstone Management Partners

Full Name (Last, First, Middle Initial)

Date of Disbursement: 05/05/2014

Mailing Address: 17 Westminster Gate

City: Bergenfield State: NJ Zip Code: 07621

Purpose of Disbursement: Mass mailing Category/Type: 006

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary Other (specify) General

State: District:

Amount of Each Disbursement this Period: 35,000.00

B. Cornerstone Management Partners

Full Name (Last, First, Middle Initial)

Date of Disbursement: 05/13/2014

Mailing Address: 17 Westminster Gate

City: Bergenfield State: NJ Zip Code: 07621

Purpose of Disbursement: Mass mailing Category/Type: 006

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary Other (specify) General

State: District:

Amount of Each Disbursement this Period: 9,000

C. Perceptions Design Studio

Full Name (Last, First, Middle Initial)

Date of Disbursement: 04/30/2014

Mailing Address: 4 Northfield Rd.

City: Amherst State: NH Zip Code: 03031

Purpose of Disbursement: Logo design Category/Type: 006

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary Other (specify) General

State: District:

Amount of Each Disbursement this Period: 393.00

SUBTOTAL of Disbursements This Page (optional): 44,393.00

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

14020591649

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
-----------------------------------------------	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)
Bell for Senate

A. Full Name (Last, First, Middle Initial)
Cornerstone Management Partners

Mailing Address: **17 Westminster Gate**

City: **Bergenfield, NJ** State: **NJ** Zip Code: **07621**

Purpose of Disbursement: **mass mailing** Category/Type: **006**

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

Date of Disbursement: **05 / 16 / 2014**

Amount of Each Disbursement this Period: **14,400.00**

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

Date of Disbursement

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **14,400.00**

TOTAL This Period (last page this line number only)

14020591650

**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

A.

Full Name (Last, First, Middle Initial) **Bell, Jeff**

Date of Disbursement **06 / 16 / 2014**

Mailing Address **132 Christie St.**

City **Leonia, NJ** State Zip Code

Purpose of Disbursement **loan repayment** Category/Type **009**

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period **5,000.00**

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **5,000.00**

TOTAL This Period (last page this line number only) **143,396.69**

14020591651

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full)
Bell for Senate

LOAN SOURCE Full Name (Last, First, Middle Initial)
Bell, Jeff

Mailing Address
132 Christie St.

City State ZIP Code
Leonia, NJ 07605

Election:
 Primary
 General
 Other (specify) ▼

Original Amount of Loan **30,000.00** Cumulative Payment To Date **0** Balance Outstanding at Close of This Period **30,000.00**

TERMS

Date Incurred: **04** / **28** / **2014** Date Due: **N/A** Interest Rate: **N/A** % (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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)... **30,000.00**

TOTALS This Period (last page in this line only).. **30,000.00**

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

14020591652

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Bell for Senate**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Bell, Jeff**

Mailing Address **132 Christie St.**

City **Leonia** State **NJ** ZIP Code **07605**

Election: Primary General Other (specify) ▼

Original Amount of Loan **5,000.00** Cumulative Payment To Date **5,000.00** Balance Outstanding at Close of This Period **0.00**

TERMS Date Incurred **05 / 15 / 2014** Date Due **N/A** Interest Rate **N/A** % (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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)... **5,000.00**

TOTALS This Period (last page in this line only)... **35,000.00**

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

14020591653

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

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 1680 Capital One Dr	
City State Zip Code McLean, VA 22102	

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 14,993.33	Payment This Period 0.00	Outstanding Balance at Close of This Period 14,993.33
----------------------------------------------------------	-------------------------------------------------	------------------------------------	-----------------------------------------------------------------

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Elliot Curson Advertising	Nature of Debt (Purpose): radio production
Mailing Address 1900 Rittenhouse Square	
City State Zip Code Philadelphia, PA 19103	

Outstanding Balance Beginning This Period 0.00	Amount Incurred This Period 1,100.00	Payment This Period 0	Outstanding Balance at Close of This Period 1,100.00
----------------------------------------------------------	------------------------------------------------	---------------------------------	----------------------------------------------------------------

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) ...	
2) TOTALS This Period (last page this line number) ...	16,093.33
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	30,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	46,093.33

31654

14020591655

NGELO & O'BRIEN, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
340 NORTH AVENUE EAST
CRANFORD, NJ 07016

PLACE STAMP OR POSTAGE HERE TO THE RIGHT
OF THE RETURN ADDRESS FOLLOW DOTTED LINE
CERTIFIED MAIL



7013 2630 0000 3955 5429



1000



20013

U.S. POSTAGE
PAID
HACKENSACK, NJ
JUL 07 2014
AMOUNT
\$9.50
00089930-04

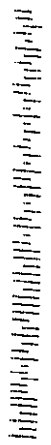
RETURN RECEIPT
REQUESTED

PERSONAL
AND
CONFIDENTIAL

Secretary of the Senate
c/o office of Public Records
P.O. Box 77578
Washington, D.C. 20013-7578

SCREENED
IN THE
POST OFFICE

RETURN RECEIPT
REQUESTED



JANCY ERICKSON
SECRETARY

JANA K. MICALLUM
SUPERINTENDENT
STATE OFFICE BLDG
SUITE 232
WASHINGTON, DC 20510-71
PHONE (202) 224-0322

United States Senate
OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____ Date of Receipt

USPS FIRST CLASS MAIL _____ 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

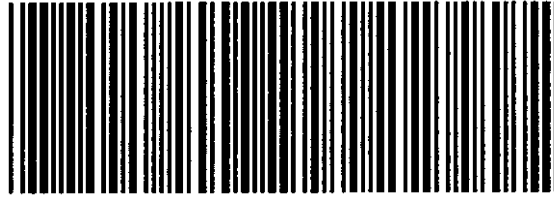
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____ Date of Receipt

OTHER _____ Date of Receipt or Postmark

PREPARER MN DATE PREPARED 7/18/14

14020591656



SEN PATCH



SEN PATCH

14020591657