

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 TOM MACARTHUR FOR CONGRESS INC.

ADDRESS (number and street) PO Box 999 Edison NJ 08818-0999 Check if different than previously reported. (ACC) CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00557520 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NJ 03

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 11 / 08 / 2016 in the State of NJ (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

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 Gravino, Ronald, , Signature of Treasurer Gravino, Ronald, , [Electronically Filed] Date 10 / 27 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**TOM MACARTHUR FOR CONGRESS INC.**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	84843.00	1596003.37
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	5325.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	84743.00	1590678.37
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	326277.59	1595181.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	999.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	326277.59	1594182.21
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	201787.40	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	728921.31	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**TOM MACARTHUR FOR CONGRESS INC.**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	39375.00	717143.16
(ii) Unitemized .....	1018.00	36723.82
(iii) TOTAL of contributions from individuals .....	40393.00	753866.98
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	44450.00	842136.39
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	84843.00	1596003.37
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	1250.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	200000.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	200000.00	200000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	999.30
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	25953.53
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	284843.00	1824206.20

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	326277.59	1595181.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	4725.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	100.00	5325.00
21. OTHER DISBURSEMENTS .....	30250.00	353289.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	356627.59	1953795.51

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	273571.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	284843.00
25. SUBTOTAL (add Line 23 and Line 24).....	558414.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	356627.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	201787.40

**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 45  
(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)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Kearney, Michael, C, ,**  
 Mailing Address 700 Manor Rd  
 City Cinnaminson State NJ Zip Code 08077-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer General Controls Inc Occupation Owner  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016  
**Transaction ID : A65EC75F6320B42F2A04**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Schlanger, Marvin, , ,**  
 Mailing Address 125 Via Quantera  
 City Palm Beach Gardens State FL Zip Code 33418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cherry Hill Chemical Investmen Occupation Principal  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016  
**Transaction ID : AEE6BD3378086419B900**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Bross, David, , ,**  
 Mailing Address 1802 Country Club Dr  
 City Cherry Hill State NJ Zip Code 08003-3314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bross & Frankel PA Occupation Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016  
**Transaction ID : A66B4A7BE27B246E2933**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1800.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 6 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Malberg, Marc, , ,**  
 Mailing Address 182 Autumn Hill Rd  
 City Princeton State NJ Zip Code 08540-2912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Marc Malberg Occupation Physician  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 11 2016  
**Transaction ID : A38E4ECF049FB493C811**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Schneiberg, Dimitri, , ,**  
 Mailing Address 10 Windemere Dr  
 City Moorestown State NJ Zip Code 08057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Learn Quest Occupation Managing Director  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 13 2016  
**Transaction ID : AA4B5D386815E445A941**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Koenig, James, , ,**  
 Mailing Address 1323 Valley Rd  
 City Villanova State PA Zip Code 19085-2125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Paul Hastings LLP Occupation Lawyer  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016  
**Transaction ID : A85D90F266C1241F2B8F**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 815 Harriton Rd

City State Zip Code  
Bryn Mawr PA 19010-1812

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

Name of Employer Occupation  
Kenneth Braun Ophthalmologist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

**Transaction ID : AA68E22E20B4C4295B46**

Amount of Each Receipt this Period  
375.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Whitney, Jason, R, ,**

Mailing Address 11 Furlong Dr

City State Zip Code  
Cherry Hill NJ 08003-5138

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

Name of Employer Occupation  
AlphaimpactRx Market Research

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

**Transaction ID : A05274FCD02E64136885**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Richter, David, L, ,**

Mailing Address 274 Carter Rd

City State Zip Code  
Princeton NJ 08540-2109

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

Name of Employer Occupation  
Hill International Inc CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A3DC838FDFC01421D92C**

Amount of Each Receipt this Period  
1200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1825.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Prime, Timothy, M, ,**

Mailing Address 14000 HOrizon Way  
Ste 325

City Mount Laurel State NJ Zip Code 08054-4342

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

Name of Employer Prime Law Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : **A9C96F77CDA6F4EB99E0**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 423 Princeton Ave

City Brick State NJ Zip Code 08724-4825

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

Name of Employer Pine Belt Occupation Auto Dealer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2016

Transaction ID : **A80609D4995BE419FA0B**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 108 Rockford Grove Ln

City Wilmington State DE Zip Code 19806-2246

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

Name of Employer Skadden, Arps, Slate, Meagher & Flom L Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016

Transaction ID : **AF05255542C2B4262861**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 1750 Walton Rd

City Blue Bell	State PA	Zip Code 19422-2306
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FEC ID number of contributing federal political committee. **C**

Name of Employer DePaul Group	Occupation Developer
----------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A12748C6E04A04A34AB7**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Smukler, Andrew, M, ,**

Mailing Address 110 Brooks Bend

City Princeton	State NJ	Zip Code 08540-7545
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FEC ID number of contributing federal political committee. **C**

Name of Employer Andrew Smukler	Occupation Investments
------------------------------------	---------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

**Transaction ID : AFC0F9536F5FB4D17BCF**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 20 Sheffield Dr

City Moorestown	State NJ	Zip Code 08057
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FEC ID number of contributing federal political committee. **C**

Name of Employer Dorfner Family Medicine	Occupation Physician
---	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

**Transaction ID : A1EEF81917D934DA6946**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Threston, Joseph, T, , III**

Mailing Address 307 7th St

City Riverton State NJ Zip Code 08077

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

Name of Employer Law Office of Joseph Threston Occupation Laywer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A9F8E0D4F77224DC5A03**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 404 Windrow Clusters Dr

City Moorestown State NJ Zip Code 08057-4306

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

Name of Employer Prestige Volkswagen Subaru Occupation Auto Retailer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A26DA4DDDC9B046A3B6C**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 54 Fries Ln

City Cherry Hill State NJ Zip Code 08003-2506

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A6B7CDD565BE3407EB1B**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

1800.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 1111 W DeKalb Pike

City Wayne State PA Zip Code 19087-2180

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

Name of Employer Capital Management Enterprises Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2016

Transaction ID : **AF5ADFD1995B1459D8E0**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rosnov, David, M, ,**

Mailing Address 104 Pine Tree Ln

City Plymouth Meeting State PA Zip Code 19462-1034

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

Name of Employer Rosnov Jewelers Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 13 2016

Transaction ID : **AFC3F988791514CB99B1**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 61 Brooks Rd

City Moorestown State NJ Zip Code 08057-3855

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 13 2016

Transaction ID : **A3EE78E2671A342BEA8E**

Amount of Each Receipt this Period  
 300.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1800.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 170 E Main St

City Moorestown State NJ Zip Code 08057-2949

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

Name of Employer Atlantic Trailer Leasing Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 19 2016

Transaction ID : **AF09B48BCD7C344F8B2C**

Amount of Each Receipt this Period  
1350.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Shechtel, Raquel, , ,**

Mailing Address 33 Witherspoon St  
3rd Fl

City Princeton State NJ Zip Code 08542

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2016

Transaction ID : **A20952420560C40C18CA**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Felgoise, Marc, L, ,**

Mailing Address 7139 Sheaff Ln

City Fort Washington State PA Zip Code 19034-2007

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

Name of Employer Intersect Advisers Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 18 2016

Transaction ID : **A547C8994F3C84FAC824**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3350.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Horowitz, David, , ,**  
 Mailing Address 109 Chester Ln  
 City Ambler State PA Zip Code 19002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Young Adjuster Co Occupation Insurance Adjuster  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2016  
**Transaction ID : A2A31173371DF4083821**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Tanenbaum, Steven, R, ,**  
 Mailing Address 1237 Arwyn Ln  
 City Gladwyne State PA Zip Code 19035-1414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A Wish Come True Occupation Chairman  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016  
**Transaction ID : AF487DF4D6CF24D609DD**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ryan, Charles, , ,**  
 Mailing Address 451 St Davids Ave  
 City Wayne State PA Zip Code 19087-4204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UFG Asset Management Occupation Fund Manager  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2016  
**Transaction ID : A2719DC62EC224A77ABA**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Krakauer, Randall, S, ,**  
Mailing Address 29 Lorrie Ln  
City Princeton Junction State NJ Zip Code 08550-5112  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016  
Transaction ID : **A850A9FB48CB14BAD8CD**  
Amount of Each Receipt this Period  
2000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Forsted, David, , ,**  
Mailing Address 615 Fariston Dr  
City Wynnewood State PA Zip Code 19096-2506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Radiology Associates Occupation Radiologist  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016  
Transaction ID : **ACDCD5ACC79E3423AA08**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Winigrad, Jacob, S, ,**  
Mailing Address 36 Southwood Dr  
City Cherry Hill State NJ Zip Code 08003-2950  
FEC ID number of contributing federal political committee. **C**  
Name of Employer JSW Development Occupation Businessman  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2016  
Transaction ID : **A0C4C95632EF542C7B6C**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 1224 Tockington Ct

City Jenkintown State PA Zip Code 19046-2907

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

Name of Employer Jefferson Health Occupation Physician

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2016

Transaction ID : **AB3ABAA1708A34073ACC**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ferreira, Nelson, , ,**

Mailing Address 31 Tannery Rd

City Branchburg State NJ Zip Code 08876-6001

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

Name of Employer Ferreira Construction Company Inc Occupation Construction

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2016

Transaction ID : **AA20A9DAF5D3F42D5AA9**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Miller, Charles, S, ,**

Mailing Address 14 Roberts Dr

City Westampton State NJ Zip Code 08060-4400

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

Name of Employer Miller Service Group Occupation Transportation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 19 2016

Transaction ID : **A75286B1EADD544239AA**

Amount of Each Receipt this Period  
700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3900.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 2401 Pennsylvania Ave  
Apt 19A5

City Philadelphia State PA Zip Code 19130-3059

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

Name of Employer Pepper Hamilton LLP Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

Transaction ID : **A716D1B9EE79849998F4**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bianchi, Marc, Douglas, ,**

Mailing Address 1504 Lexington Dr

City Dresher State PA Zip Code 19025-1252

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

Name of Employer Intersect Advisers Occupation Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2016

Transaction ID : **A2BBFF708DC4E4E819A6**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Duva, Regina, A, ,**

Mailing Address 82 Harrowgate Dr

City Cherry Hill State NJ Zip Code 08003-1942

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

Name of Employer Opus Life Coaching LLC Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

Transaction ID : **AD7769C2AE2CB43AC973**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 45  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 8918 SE Water Oak Pl

City Jupiter State FL Zip Code 33469-1810

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 11 2016

Transaction ID : **AB7FB083C7F6D4681B3C**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rabenou, Richelle, J, ,**

Mailing Address 161 Pheasant Field Ln

City Moorestown State NJ Zip Code 08057-1431

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

Name of Employer Shore Beauty School Occupation VP Director of Marketing

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2016

Transaction ID : **A8D9B7FA6FE7D4D9EB99**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 33 Witherspoon St  
3rd Fl

City Princeton State NJ Zip Code 08542

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

Name of Employer TGS Management Occupation Co-Founder

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 13 2016

Transaction ID : **AB3E64C3A3A1A4476A93**

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2800.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Nistad, Jon, N, ,**  
 Mailing Address 115 W Centennial Dr  
 City Medford State NJ Zip Code 08055-8136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer National HR Occupation Employer Benefits  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016  
**Transaction ID : A25D957AEA4EE4115969**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Hesse, Lawrence, , ,**  
 Mailing Address 357 W Lake Ave  
 City Bay Head State NJ Zip Code 08742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CJ Hesse Occupation President  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 4700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016  
**Transaction ID : A8753AB18ED4749D3AEB**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Erlbaum, Gary, , ,**  
 Mailing Address 44 W Lancaster Ave  
 Ste 110  
 City Ardmore State PA Zip Code 19003-1350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gary Erlbaum Occupation Real Estate Developer  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2016  
**Transaction ID : A5A85E05FE06248E9A6D**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5200.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 1500 Bardsey Rd

City Ambler	State PA	Zip Code 19002-1547
----------------	-------------	------------------------

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

Name of Employer Creative Financial Group	Occupation Financial Planner
--	---------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2016

**Transaction ID : ABABE933502E84530BB4**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Barlow, Theresa, J, ,**

Mailing Address 725 Stonehouse Rd

City Moorestown	State NJ	Zip Code 08057-2120
--------------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A1CA4F66CD1514FF48E6**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address PO Box 30

City Moorestown	State NJ	Zip Code 08057
--------------------	-------------	-------------------

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

Name of Employer Joseph Caruso	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : AB4FFEDA7C5354880BEC**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 20 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**Fox, Harry, , ,**  
Mailing Address 15 Clay St

City Delran State NJ Zip Code 08075

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

Name of Employer Environmental Resolutions Inc Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : **A2809F9B3D46145F39C2**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Brown, William, , ,**  
Mailing Address 617 Linden Ave

City Riverton State NJ Zip Code 08077

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

Name of Employer Borough of Riverton Occupation Mayor

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2016

Transaction ID : **AE770461F63E14EA5B34**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 300.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**443 Associates Llc**  
Mailing Address 443 Atlantic City Blvd

City Beachwood State NJ Zip Code 08722-4003

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2016

Transaction ID : **A8C620B13C7A14D5F98D**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

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

\_\_\_\_\_ 1100.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 21 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

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

Mailing Address 443 Atlantic City Blvd

City Beachwood State NJ Zip Code 08722

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

Name of Employer 443 Associates LLC Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 11 2016

Transaction ID : **A45991A36A72A441FBC4**

Amount of Each Receipt this Period  
 500.00

Memo Item  
 Partnership  
 Partnership: 443 Associates Llc

**B.** Full Name (Last, First, Middle Initial)  
**Zeller & Wieliczko Llp**

Mailing Address 120 Haddontowne Ct

City Cherry Hill State NJ Zip Code 08034-3666

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A2F8EAE0C61B546469CC**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 120 Haddontowne Ct

City Cherry Hill State NJ Zip Code 08034-3666

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

Name of Employer Zeller & Wieliczko Llp Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **AA5A41BF8CB064465A5C**

Amount of Each Receipt this Period  
 300.00

Memo Item  
 Partnership  
 Partnership: Zeller & Wieliczko Llp

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300.00

**TOTAL** This Period (last page this line number only)..... ▶ 39375.00

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

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

FOR LINE NUMBER: PAGE 22 OF 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**National Automobile Dealers Association PAC**

Mailing Address 8400 Westpark Dr

City Tysons State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A91E0A407ED594B52B5E**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ubs Americas Inc Pac**

Mailing Address 1501 K St NW Ste 1100

City Washington State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **AD9A8BDBA1F94459BBAD**

Amount of Each Receipt this Period  
3500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Aqua America Inc H2o Pac**

Mailing Address 762 W Lancaster Ave

City Bryn Mawr State PA Zip Code 19010-3402

FEC ID number of contributing federal political committee. **C** C00340455

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 19 2016

Transaction ID : **A7E51AC4906124BF19F8**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2016

**Transaction ID : AE374BC54FEC3419F99C**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
National Rural Letter Carriers' Association PAC

Mailing Address 1630 Duke St  
FI 2

City Alexandria	State VA	Zip Code 22314-3467
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : AA16BA432D17C46EC962**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
American Hospital Association Pac

Mailing Address 800 10th St NW  
Two City Center

City Washington	State DC	Zip Code 20001-5188
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A87E89317DEFF4E7C88E**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**San Manuel Band Of Mission Indians**

Mailing Address 515 S Figueroa St  
Ste 1110

City Los Angeles	State CA	Zip Code 90071-3314
---------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A92B1B38AC9C54E208CA**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Council Of Engineering Companies PAC**

Mailing Address 1015 15th St NW

City Washington	State DC	Zip Code 20005-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2016

**Transaction ID : A4600696E1E3F4BEAB1E**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 25 Louisiana Ave NW

City Washington	State DC	Zip Code 20001-2130
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A8517A961C46643488B9**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**DUANE MORRIS GOVERNMENT COMMITTEE**

Mailing Address 30 SOUTH 17TH STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A374C1EFD0B3B4A14A69**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Keystone Alliance Pac**

Mailing Address PO Box 3883

City Philadelphia	State PA	Zip Code 19146-0183
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00432096

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A1883D69EABF04265AEA**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WAKEFERN FOOD CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 33 NORTHFIELD AVENUE

City EDISON	State NJ	Zip Code 08818
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489005

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : A4A7B842C17D843C2A44**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTITUTION AVENUE, NW  
10TH FLOOR WEST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2016

**Transaction ID : A64D97B945A534484B98**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
American Society of Anesthesiologists PAC

Mailing Address 1061 American Ln

City Schaumburg	State IL	Zip Code 60173-4973
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : AE8AF56BF5F1148389B2**

Amount of Each Receipt this Period  
4000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Winning Strategies Washington PAC

Mailing Address 409 7th St NW  
Ste 450

City Washington	State DC	Zip Code 20004-2314
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00368993

Name of Employer	Occupation
------------------	------------

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : ACE0C54DF98E0482484E**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
**American Medical Association Pac**

Mailing Address 25 Massachusetts Ave NW  
Ste 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A65CDF7AFA4BF4F9E95F**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Comcast Corp & NBC Universal PAC**

Mailing Address 1701 JFK Blvd

City Philadelphia State PA Zip Code 19103-2833

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

**Transaction ID : A983265F1296A4F22A76**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL**

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2016

**Transaction ID : AA494BC04A55049EC982**

Amount of Each Receipt this Period  
4250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8250.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	44450.00

**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 45  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

**A.** Full Name (Last, First, Middle Initial)  
MacArthur, Thomas, , ,  
Mailing Address 77 EAST WATER STREET #24

City TOMS RIVER State NJ Zip Code 08753

FEC ID number of contributing federal political committee. **C** H4NJ03130

Name of Employer US Congress Occupation Member of Congress

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
200000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 17 2016

Transaction ID : A35C4117738F8415ABA1

Amount of Each Receipt this Period  
200000.00

Memo Item  
Candidate Loan

**B.** Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	200000.00

**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 29 OF 45	
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Chris Russell Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016	
Mailing Address 1704 Maxwell Dr Ste 202			FEC Identification Number C	
City Wall	State NJ	Zip Code 07719	Amount of Each Disbursement this Period 9000.00	
Purpose of Disbursement Political Strategy Consulting		Category/ Type 001	Transaction ID : B5ED07F2090AB46D480C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nassau Strategies LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016	
Mailing Address 101 Knob Hill Rd			FEC Identification Number C	
City Hackettstown	State NJ	Zip Code 07840-4222	Amount of Each Disbursement this Period 905.56	
Purpose of Disbursement Direct Mail Postage		Category/ Type 001	Transaction ID : B7546B4C33F984F65B63	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Baywick Plaza Llc</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016	
Mailing Address 100 Woodbridge Center Dr			FEC Identification Number C	
City Woodbridge	State NJ	Zip Code 07095-1162	Amount of Each Disbursement this Period 700.00	
Purpose of Disbursement Rent		Category/ Type 001	Transaction ID : BE3025FFF0567431AB95	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10605.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Ronald Gravino Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address PO Box 999			FEC Identification Number C		
City Edison	State NJ	Zip Code 08818-0999	Amount of Each Disbursement this Period 4022.34		
Purpose of Disbursement Compliance		Category/ Type 001	Transaction ID : B9D46025407D1414E9A8		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Political Communications Advertising</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 37 W 39th St Ste 602			FEC Identification Number C		
City New York	State NY	Zip Code 10018	Amount of Each Disbursement this Period 72000.00		
Purpose of Disbursement Media		Category/ Type 004	Transaction ID : B69E6640318B24A3C84E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Griswold, Chris, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 9 East 5th St			FEC Identification Number C		
City Barnegat Light	State NJ	Zip Code 08006	Amount of Each Disbursement this Period 855.20		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : BC18F9EA19B8A49D1946		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	76877.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Smith, Kirstie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 129 Kinsman Rd			FEC Identification Number C		
City Florence	State NJ	Zip Code 08518-1607	Amount of Each Disbursement this Period 2312.87		
Purpose of Disbursement		Category/Type	Transaction ID : B2D49C51BD3E94E57A58		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Bonfonti, Thomas, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 31 Barbara Ct			FEC Identification Number C		
City Waretown	State NJ	Zip Code 08758	Amount of Each Disbursement this Period 2554.51		
Purpose of Disbursement Payroll		Category/Type 001	Transaction ID : B716DD48D8F454C36A4E		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Brinkman, Brittany, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 1 Windsor Ct			FEC Identification Number C		
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 419.47		
Purpose of Disbursement Payroll		Category/Type 001	Transaction ID : BC3C590BBBCC848BEBEE		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5286.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Neely, Harrison, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2016		
Mailing Address 1 Richmond St Apt 2048			FEC Identification Number C		
City New Brunswick	State NJ	Zip Code 08901-4101	Amount of Each Disbursement this Period 4469.52		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : B8F540DD670FD401391D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. AP Intego</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2016		
Mailing Address 144 North Rd Ste 2050			FEC Identification Number C		
City Sudbury	State MA	Zip Code 01776	Amount of Each Disbursement this Period 37.08		
Purpose of Disbursement Insurance		Category/ Type 001	Transaction ID : B9A0A1CB37C374BB8A0A		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Political Communications Advertising</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2016		
Mailing Address 37 W 39th St Ste 602			FEC Identification Number C		
City New York	State NY	Zip Code 10018	Amount of Each Disbursement this Period 100000.00		
Purpose of Disbursement Media		Category/ Type 004	Transaction ID : B85FCEF482A824411B09		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	104506.60
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. AP Intego</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016		
Mailing Address 144 North Rd Ste 2050			FEC Identification Number C		
City Sudbury	State MA	Zip Code 01776	Amount of Each Disbursement this Period 58.21		
Purpose of Disbursement Insurance		Category/ Type 001	Transaction ID : B483F6DC424914B04BBE		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Transxt</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2016		
Mailing Address 190 Monroe NW 5th Fl			FEC Identification Number C		
City Grand Rapids	State MI	Zip Code 49503	Amount of Each Disbursement this Period 187.79		
Purpose of Disbursement Bank Fee		Category/ Type 001	Transaction ID : B557CEE81777C4B788A4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Chris Russell Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2016		
Mailing Address 1704 Maxwell Dr Ste 202			FEC Identification Number C		
City Wall	State NJ	Zip Code 07719	Amount of Each Disbursement this Period 145.00		
Purpose of Disbursement Digital Advertising		Category/ Type 004	Transaction ID : BAE7C67CDA66748B3B23		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	391.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 45	
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Political Communications Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016
Mailing Address 37 W 39th St Ste 602		FEC Identification Number C
City New York	State NY	Zip Code 10018
Purpose of Disbursement Media	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 17000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B8B7C0925634E48D7840
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Mangini, Carly, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016
Mailing Address 10 Indian Terr		FEC Identification Number C
City Locust	State NJ	Zip Code 07760-2342
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 1381.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7EA80469951C48F2A81
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Paycycle</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016
Mailing Address 210 Portage Ave		FEC Identification Number C
City Palo Alto	State CA	Zip Code 94306
Purpose of Disbursement Payroll Taxes	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 463.47	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7521659C83E440768C0
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18844.87
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 45	
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2016
Mailing Address 1398 Highway 9		FEC Identification Number C
City Old Bridge	State NJ	Zip Code 08857
Purpose of Disbursement Bank Fee	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 97.78	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2304B56BF0994E6EB1F
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Political Communications Advertising</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2016
Mailing Address 37 W 39th St Ste 602		FEC Identification Number C
City New York	State NY	Zip Code 10018
Purpose of Disbursement Media	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 83000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC79618B8C6C5446FADD
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. National Research Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2016
Mailing Address 146 State Route 34 Ste 250		FEC Identification Number C
City Holmdel	State NJ	Zip Code 07733
Purpose of Disbursement Polling	Category/ Type 005	
Candidate Name	Amount of Each Disbursement this Period 17000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BEED4A4C893734B32AC1
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100097.78
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Transaxt</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2016
Mailing Address 190 Monroe NW 5th Fl		FEC Identification Number C
City Grand Rapids	State MI	Zip Code 49503
Purpose of Disbursement Bank Fee		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 292.96
State: District:		Transaction ID : <b>BB9E2E583CF8D43A98F4</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Burlington County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2016
Mailing Address 223 High St		FEC Identification Number C
City Mt Holly	State NJ	Zip Code 08060
Purpose of Disbursement Rent		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 7500.00
State: District:		Transaction ID : <b>BD66FDFB5AFB645BC932</b>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. The Prosper Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2016
Mailing Address 435 E Main St Room 250		FEC Identification Number C
City Greenwood	State IN	Zip Code 46143
Purpose of Disbursement Email Service		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 132.77
State: District:		Transaction ID : <b>B4A72CBB33D944BC996C</b>
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7925.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 45	
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Bonfonti, Thomas, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 31 Barbara Ct			FEC Identification Number C	
City Waretown	State NJ	Zip Code 08758	Amount of Each Disbursement this Period 118.16	
Purpose of Disbursement Office Supplies/Volunteer Food/Beverage		Category/ Type 001	Transaction ID : BA40737181F32408187B	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Senza Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2016	
Mailing Address 333 Atlantic City Blvd Ste 10			FEC Identification Number C	
City Bayville	State NJ	Zip Code 08721-1262	Amount of Each Disbursement this Period 103.81	
Purpose of Disbursement Volunteer Food/Beverage		Category/ Type 001	Transaction ID : B08B5AB9D69184FAF97D	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Viking Fresh off the Hook</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address PO Box 787			FEC Identification Number C	
City Barnegat Light	State NJ	Zip Code 08006	Amount of Each Disbursement this Period 1123.50	
Purpose of Disbursement Debt Repayment: Food/Beverage		Category/ Type 003	Transaction ID : B6560206FEED349D0ABD	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1241.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 45			
	<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)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. Johnson's Locust Hall Farms</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016		
Mailing Address 2691 Monmouth Rd			FEC Identification Number C		
City Jobstown	State NJ	Zip Code 08041	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Debt Repayment: Facility Rental		Category/ Type 003	Transaction ID : BA844CB044852468AAE9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
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>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	326277.59

**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 39 OF 45	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

Full Name (Last, First, Middle Initial) <b>A. RROBT</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address 14 Seagull Point			FEC Identification Number C	
City Bayville	State NJ	Zip Code 08721	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : BEE0F1D407FB84E40916	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ocean County Republican Finance Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2016	
Mailing Address PO Box 408			FEC Identification Number C	
City Bayville	State NJ	Zip Code 08721-0442	Amount of Each Disbursement this Period 30000.00	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : B0EE25C2F2BA84FB88E9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30250.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **TOM MACARTHUR FOR CONGRESS INC.** Transaction ID : C35C4117738F8415ABA1

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) MacArthur, Thomas, , ,		<input type="checkbox"/> Memo Item	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 77 EAST WATER STREET #24			
City TOMS RIVER	State NJ	ZIP Code 08753	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 200000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 200000.00
--------------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 10 / D 17 / Y 2016	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	200000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **TOM MACARTHUR FOR CONGRESS INC.** Transaction ID : **CAC5E823F153B4AA5A5F**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) MacArthur, Thomas, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 77 EAST WATER STREET #24			
City TOMS RIVER	State NJ	ZIP Code 08753	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
---------------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 03 / D 31 / Y 2014	Date Due M M / D D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	250000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **TOM MACARTHUR FOR CONGRESS INC.** Transaction ID : **C4BE5AE08657F4491B89**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) MacArthur, Thomas, , ,		<input type="checkbox"/> Memo Item	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 77 EAST WATER STREET #24			
City TOMS RIVER	State NJ	ZIP Code 08753	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
---------------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 10 / D 10 / Y 2014	Date Due M / D / Y None	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	----------------------------	--	---

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....▶	250000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	700000.00

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

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**TOM MACARTHUR FOR CONGRESS INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MacArthur, Thomas, , ,</b>			Nature of Debt (Purpose): Candidate Travel/ Meeting Expense		
Mailing Address 77 EAST WATER STREET #24					
City TOMS RIVER	State NJ	Zip Code 08753			

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1246.74"/>			<b>Transaction ID : D9D209E9B02574122899</b>		
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1246.74"/>			

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MacArthur, Thomas, , ,</b>			Nature of Debt (Purpose): Candidate Travel/Meeting Expense		
Mailing Address 77 EAST WATER STREET #24					
City TOMS RIVER	State NJ	Zip Code 08753			

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1945.15"/>			<b>Transaction ID : DD064045D9E2F47B5AB8</b>		
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1945.15"/>			

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MacArthur, Thomas, , ,</b>			Nature of Debt (Purpose): Candidate Travel/Meeting Expense		
Mailing Address 77 EAST WATER STREET #24					
City TOMS RIVER	State NJ	Zip Code 08753			

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="3038.67"/>			<b>Transaction ID : D7B6C2FF89CAE48589D6</b>		
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="3038.67"/>			

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width:100%;" type="text" value="6230.56"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width:100%;" type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width:100%;" type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width:100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Johnson's Locust Hall Farms</b>			Nature of Debt (Purpose): Facility Rental
Mailing Address 2691 Monmouth Rd			
City Jobstown	State NJ	Zip Code 08041	

Outstanding Balance Beginning This Period 500.00	Transaction ID : D6921F0709E2A4AB584C	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Viking Fresh off the Hook</b>			Nature of Debt (Purpose): Food/Beverage
Mailing Address PO Box 787			
City Barnegat Light	State NJ	Zip Code 08006	

Outstanding Balance Beginning This Period 1123.50	Transaction ID : D0FBC6F5723B84C98A58	
Amount Incurred This Period 0.00	Payment This Period 1123.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Bridge Majority LLC</b>			Nature of Debt (Purpose): Fundraising
Mailing Address 2 W Windsor Ave			
City Alexandria	State VA	Zip Code 22301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD89C7E9BB08B479EA9A	
Amount Incurred This Period 21500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	21500.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**TOM MACARTHUR FOR CONGRESS INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Paycycle</b>			Nature of Debt (Purpose): Payroll Taxes
Mailing Address 210 Portage Ave			
City Palo Alto	State CA	Zip Code 94306	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DEA92212F02974A21A5A	
Amount Incurred This Period 1190.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 1190.75	

B. 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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	1190.75
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	28921.31
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	700000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	728921.31