

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

Office Use Only

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

NORPAC

ADDRESS (number and street)

PO Box 5595

☐Check if different  
than previously  
reported. (ACC)

Englewood

NJ

07631

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00247403

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

08

01

2011

through

08

31

2011

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

Karen Pichkhadze

Signature of Treasurer

Electronically Filed by Karen Pichkhadze

Date

09

09

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications such as ads are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
NORPAC

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	397275.38
(b) Cash on Hand at Beginning of Reporting Period .....	306475.17	
(c) Total Receipts (from Line 19) .....	17026.25	405336.15
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	323501.42	802611.53
7. Total Disbursements (from Line 31) .....	37578.47	516688.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	285922.95	285922.95
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
NORPAC

Report Covering the Period:

From:

M M D D Y Y W Y  
0 8 0 1 2 0 1 1

To:

M M D D Y Y W Y  
0 8 3 1 2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	16250.00	339701.00
(ii) Unitemized .....	0.00	57552.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	16250.00	397253.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	16250.00	397253.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	775.69	1480.88
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.56	1602.27
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	17026.25	405336.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17026.25	405336.15

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	12328.47	234089.58	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12328.47	234089.58	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25250.00	273449.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	7950.00	
(b) Political Party Committees	0.00	1200.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	9150.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37578.47	516688.58	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	37578.47	516688.58	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	16250.00	397253.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	9150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16250.00	388103.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12328.47	234089.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	775.69	1480.88
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11552.78	232608.70

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

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

FOR LINE NUMBER: PAGE 7 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Laurie Baumel

Mailing Address 797 Winthrop Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
none

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3305.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30013

Amount of Each Receipt this Period

500.00

earmark-pascrell

**B.**

Full Name (Last, First, Middle Initial)

Ben Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.30009

Amount of Each Receipt this Period

1000.00

earmark-midpac

**C.**

Full Name (Last, First, Middle Initial)

Esther Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.30007

Amount of Each Receipt this Period

1000.00

earmark-goldfeder

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Esther Chouake

Mailing Address 245 Hutchinson Rd.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30012

Amount of Each Receipt this Period

1000.00

earmark-weprin

**B.**

Full Name (Last, First, Middle Initial)

Mark Druck

Mailing Address 650 Palmer Ave.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.30010

Amount of Each Receipt this Period

500.00

earmark-pascrell

**C.**

Full Name (Last, First, Middle Initial)

David Flamholz

Mailing Address 300 Sunset Ave.

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Abeles & Heymann

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.30044

Amount of Each Receipt this Period

2000.00

earmark-carper

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

3500.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

A.

Full Name (Last, First, Middle Initial)

Ira Friedman

Mailing Address 130 Chadwick Road

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metropolitan Life Insurance Co.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3625.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30014

Amount of Each Receipt this Period

1500.00

earmark-pascrell

B.

Full Name (Last, First, Middle Initial)

Jonathan Gellis

Mailing Address 235 New Bridge Rd.

City

New Milford

State

NJ

Zip Code

07646

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sloan Securities

Occupation  
Stock Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30015

Amount of Each Receipt this Period

500.00

earmark-pascrell

C.

Full Name (Last, First, Middle Initial)

Mark Hasten

Mailing Address 1115 W75th St.

City

Indianapolis

State

IN

Zip Code

46260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hasten Ban Shares

Occupation  
Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.30043

Amount of Each Receipt this Period

1000.00

earmark-carper

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

3000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Joshua Landes

Mailing Address 740 W 232nd Street

City

Riverdale

State

NY

Zip Code

10463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wynnefield Capital

Occupation

Investment Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.30011

Amount of Each Receipt this Period

5000.00

membership

**B.**

Full Name (Last, First, Middle Initial)

miriam lightman

Mailing Address 46 thames bvd

City

bergenfield

State

NJ

Zip Code

07610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
na

Occupation

na

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30016

Amount of Each Receipt this Period

250.00

earmark-pascrell

**C.**

Full Name (Last, First, Middle Initial)

Donald Liss

Mailing Address 3020 Arlington Avenue

City

Riverdale

State

NY

Zip Code

10463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30018

Amount of Each Receipt this Period

500.00

earmark-pascrell

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

5750.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Hannah Rothstein

Mailing Address 1421 Hudson St.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baruch College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.30008

Amount of Each Receipt this Period

500.00

earmark-rothman

**B.**

Full Name (Last, First, Middle Initial)

Laurence Schreiber

Mailing Address 494 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill Lynch

Occupation  
Investment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30019

Amount of Each Receipt this Period

500.00

earmark-pascrell

**C.**

Full Name (Last, First, Middle Initial)

steven weil

Mailing Address na

City

na

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
na

Occupation  
na

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2675.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.30020

Amount of Each Receipt this Period

500.00

earmark-pascrell

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

1500.00

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

16250.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 22

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Mindy Berman

Mailing Address 312 Cedar Ave

City

Highland Park

State

NJ

Zip Code

08904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORPAC

Occupation  
Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.69

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Transaction ID: SA15.30023

Amount of Each Receipt this Period

775.69

reimb for laptop

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

775.69

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

775.69

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)

NORPAC

**A.**

Full Name (Last, First, Middle Initial)

Valley National Bank

Mailing Address 1445 Valley Rd

City

Wayne

State

NJ

Zip Code

07470

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1587.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	1

Transaction ID: SA17.30042

Amount of Each Receipt this Period

0.56

interest

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

0.56

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

0.56

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 22

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

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave.	<b>Transaction ID:</b> SB21B.30027 <b>Date of Disbursement</b> <div> <div>08</div> <div>02</div> <div>2011</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>632.39</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave.	<b>Transaction ID:</b> SB21B.30028 <b>Date of Disbursement</b> <div> <div>08</div> <div>02</div> <div>2011</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement payroll-pichkhadze Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1536.70</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave.	<b>Transaction ID:</b> SB21B.30031 <b>Date of Disbursement</b> <div> <div>08</div> <div>10</div> <div>2011</div> </div>
City Piscataway State NJ Zip Code 08854 Purpose of Disbursement invoice Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>92.53</div>

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

**2261.62**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.30032

Date of Disbursement

/   /

Amount of Each Disbursement this Period

570.92

**B.**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement  
payroll-pickhadze

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.30035

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1505.35

**C.**

Full Name (Last, First, Middle Initial)  
susquehanna bank

Mailing Address 26 N. Cedar St

City Lilitz State PA Zip Code 17543

Purpose of Disbursement  
auto expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.30030

Date of Disbursement

/   /

Amount of Each Disbursement this Period

320.00

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

2396.27

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Valley National Bank	<b>Transaction ID:</b> SB21B.30026 <b>Date of Disbursement</b>
Mailing Address 1445 Valley Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 2 / 2 0 1 1</div> </div>
City Wayne State NJ Zip Code 07470	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement service fee Candidate Name	<div> <div>661.47</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Valley National Bank	<b>Transaction ID:</b> SB21B.30036 <b>Date of Disbursement</b>
Mailing Address 1445 Valley Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 2 / 2 0 1 1</div> </div>
City Wayne State NJ Zip Code 07470	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement visa-staples purchase Candidate Name	<div> <div>283.58</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon wireless	<b>Transaction ID:</b> SB21B.30037 <b>Date of Disbursement</b>
Mailing Address PO Box 17120	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 4 / 2 0 1 1</div> </div>
City Tucson State AZ Zip Code 85731	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement cell phone Candidate Name	<div> <div>192.39</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**1137.44**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
Washington Convention Center

Mailing Address 801 Mount Vernon PI NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
first deposit for may 2012 mission

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.30034

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6475.00

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

6475.00

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

12270.33

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) CARPER FOR SENATE	<b>Transaction ID:</b> SB23.30045 <b>Date of Disbursement</b>
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 3 / 2 0 1 1</div> </div>
City NEW CASTLE State DE Zip Code 19720	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement earmarks-see memo txt	<div>12400.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) CARPER FOR SENATE	<b>Transaction ID:</b> SB23.30046 <b>Date of Disbursement</b>
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 3 / 2 0 1 1</div> </div>
City NEW CASTLE State DE Zip Code 19720	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement pac contribution	<div>2300.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CARPER FOR SENATE	<b>Transaction ID:</b> SB23.30047 <b>Date of Disbursement</b>
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 3 / 2 0 1 1</div> </div>
City NEW CASTLE State DE Zip Code 19720	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement pac contribution	<div>2300.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

17000.00

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

A. Form/Schedule : **SB23**  
Transaction ID : **SB23.30045**

the following is a list of contributors to the camapign committee: chouake \$1,000, flamholz \$2,000, hasten \$1,000, kassen \$1,000, levinson \$2,000, lichtenstein (david) \$400, lichtenstein (shifra) \$5,000.

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) friends of phil goldfeder Mailing Address 603 hicksville rd	<b>Transaction ID:</b> SB23.30038 <b>Date of Disbursement</b> <div> <div>08</div> <div>15</div> <div>2011</div> </div>
City far rockaway State NY Zip Code 11691 Purpose of Disbursement earmark-esther chouake Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) midpac Mailing Address na City na State NY Zip Code 01234 Purpose of Disbursement earmark-ben chouake Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.30040 <b>Date of Disbursement</b> <div> <div>08</div> <div>22</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) PASCARELL FOR CONGRESS INC Mailing Address 63 QUARTZ LANE City PATERSON State NJ Zip Code 07501 Purpose of Disbursement see memo txt for earmarks Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.30021 <b>Date of Disbursement</b> <div> <div>08</div> <div>31</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b> <div>4750.00</div>

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

**6750.00**

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

C. Form/Schedule : **SB23**  
Transaction ID : **SB23.30021**

the following is a list of the contributors to the candidate: baumel \$500, druck \$500, Friedman \$1,5-00, Schreiber \$500, Gellis \$500, Llghtman \$250, Liss \$500, Weil \$500.

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

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

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NAME OF COMMITTEE (In Full)  
NORPAC**A.** Full Name (Last, First, Middle Initial)  
STEVE ROTHMAN FOR CONGRESS

Mailing Address Post Office Box 714

City Hackensack State NJ Zip Code 07602

Purpose of Disbursement  
earmark-rothstein

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 09

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.30039

Date of Disbursement

M M / D D / Y Y Y Y  
0 8 / 1 8 / 2 0 1 1

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
weprin for congress

Mailing Address nan

City na State NY Zip Code 01234

Purpose of Disbursement  
earmark-esther chouake

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.30024

Date of Disbursement

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 1 1

Amount of Each Disbursement this Period

1000.00

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

1500.00

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

25250.00