REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

2014 FEB -5 AMII: 47

Office Use Only All CENTED

NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typiner the lines.	g, type	12FE4M	5
Citizens for Mike Assac	d, Inc.		1		1 1 1 1 1	
	<u> </u>					
ADDRESS (number and street)	106 Minnetonka A	ve 	111	<u> </u>	<u> </u>	
▼ Check if different				<u> </u>	<u> </u>	
than previously reported. (ACC)	Absecon	<u> </u>		لـــــا	LNJ	08201
2. FEC IDENTIFICATION NU	JMBER ▼	CITY A			STATE A	ZIP CODE
C C00546416		3. IS THIS REPORT	X NEW	OR	AMENI (A)	DED STATE ▼ DISTRICT NJ 02 1 02
4. TYPE OF REPORT (Cho (a) Quarterly Reports: April 15 Quarterly R July 15 Quarterly R	Report (Q1)	2) 12-Day PRE	-Election Repo Primary (12P) Convention (•
October 15 Quarter		Election on	M M /	D * D /	********	
January 31 Year-En	d Report (YE) (c	30-Day POS	T-Election Rep	ir	Runoff (3	0R) Special (30S)
Termination Report	(TER)	Election on	M M M /			
5. Covering Period 10	M / P 0 / 1	2013	through	M M 12	/ Da D /	2013
I certify that I have examined things or Print Name of Treasurer	3. (1	. ,	owledge and I	pelief it is tru	e, correct an	d complete.
Signature of Treasurer	Douthy	y a	ssal	D.	ate /	131 2014
NOTE: Submission of false, errone	eous, or incomplete	information may	subject the per	son signing th	nis Report to	the penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 119

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name Citizens for Mike Assad, Inc.

Report Covering the Period:

From:



01



To:







		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	2918.00	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(b) Total Contribution Refunds (from Line 20(d))	0.00	
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2918.00	3683.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	2138.59	5250.76
	(b) Total Offsets to Operating Expenditures (from Line 14)	ورون در المستود و مستود المستود المست	COOK THE RESTRICT OF THE COOK
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	2138.59	5250.76
В.	Cash on Hand at Close of Reporting Period (from Line 27)	1789.27	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	COOL OF THE STATE	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Sohedule D)	5030.78	

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

FEC Form 3 (Revised 12/2003) of Receipts PAGE 3 / 119

Write or Type Committee Name

Citizens for Mike Assad, Inc.

1. C		Total This Period	Election Cycle-to-Date
	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees	द्वीतर स्थितकार्यकृतकार्याकृत प्राप्तुत स्थापे कार्याकृतक व्यक्तिकार्याकृतकार्यक व्यक्ति स्थापि	والاراد المرازات الإراسية والشبال المساولات في المستوسفيني المستورات
	(i) Itemized (use Schedule A)	755.00	1005.0 \$2888888888
	(ii) Unitemized	2163.00	2678.0
	(iii) TOTAL of contributions from individuals	2918.00	3683.0
		परित्र क्षेत्रावर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षेत्र वर्षे	
(c)	Political Party Committees Other Political Committees		0.0
	(such as PACs)	0.00	0.0
(d (e)	TOTAL CONTRIBUTIONS	6 0.00] Proceedings the state of the state	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	2918.00	3683.0
	RANSFERS FROM OTHER		
Al	JTHORIZED COMMITTEES	Free Services of the Service of the Services o	
3. 10	DANS:		
	Made or Guarenteed by the	ben elementere <mark>Incontant en elemente</mark> en elemente en elemente en elemente en elemente en elemente en elemente en	Samueller and greatening the spidening dimension and provide an inci-
	Candidate	713.37	3496.4 (ascoling for a 12), with a 12 constraint of the 12 constraint of
(b)	All Other Loans	0.00 Constant of the continue	0.0 - Anales Santana and the Santana Santan
(C)		Supplementary of the content of the factor of the content of the c	
	(add Lines 13(a) and (b))	713.37	3496.4
i. O	FFSETS TO OPERATING		
	(PENDITURES	I vanta male valenseten setan eta male male male male satura in ilmani.	
(R	efunds, Rebates, etc.)	0.00 }	O.O
5. O	THER RECEIPTS	Providence Secretarion to real managements and free conference	्रामा प्रकृतिसम्बद्धासम्बद्धासम्बद्धाः स्वत्यासम्बद्धाः स्वत्यासम्बद्धाः स्वत्यासम्बद्धाः स्वत्याः । १८०० । स्व
(D	ividends, Interest, etc.)		0.1

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 119

FEC Form 3 (Revised 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	(c) in the largest of story transportance in given a security in the second of the sec	5250.76
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	139.52 0.00 139.52	139.52 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees		0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	Server of the se
21.	OTHER DISBURSEMENTS		0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	2278.11 \$	(新学・2000年) 東京の東西の第二十四十四日 (1000年) 1000年(1000年) 1000年) 1000年(1000年) 1000年) 1000
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	436.01
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	
25.	SUBTOTAL (add Line 23 and Line 24)		1 4067.38 6
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	2278.11
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	G PERIOD	1789.27 第一十四日 - 1789.27 第一日 - 1789.27 - 1789

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

119 PAGE 5 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 11d Detailed Summary Page 13b 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) Citizens for Mike Assad, Inc. Full Name (Last, First, Middle Initial) Lisa M. Haggerty Date of Receipt Mailing Address 106 Minnetonka Ave M M / D V D / Y V Y Y Y 11 18 ,2013 City State Zip Code Transaction ID: SA11AI.4630 08201 Absecon FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Para Araban Cara ழ் கூறார்கள் மூள்கள் ஆர்கத் ச 500.00 Name of Employer Occupation N/A Student Receipt For: 2014 Election Cycle-to-Date Primary General demantias mediamentias en side escribarando assida mentione atilismo side escribarando de mentione de la compa 550.00 Other (specify) โดยเปลี่ยว เป็นทางที่การเป็นเลยที่การเป็นเลยที่การเป็นเลยที่การเป็นเลยที่ Full Name (Last, First, Middle Initial) Lisa M. Haggerty Date of Receipt Mailing Address 106 Minnetonka Ave City State Zip Code Transaction ID: SA11AI.4657 Absecon NJ 08201 FEC ID number of contributing Amount of Each Receipt this Period federal political committee. and the call of the self of the self and the self-CONTROL BY A STORM HAVE THE RESIDENCE Name of Employer Occupation May a Department of the state o Student N/A Receipt For: 2014 **Election Cycle-to-Date** Primary General grounding of the problem part of the problem with the control of the second 555.00 Other (specify) Full Name (Last, First, Middle Initial) Lauren J. Seymour Date of Receipt Mailing Address 110 N Jasper Ave M 12 30 2013 City State Zip Code Transaction ID: SA11AI.4658 NJ 08402 Margate garangan garag regarap angwert FEC ID number of contributing Amount of Each Receipt this Period federal political committee. Endertholder Aming in heart in the 19 250.00 Name of Employer Occupation **IT Analyst** Borgata Hotel Casino & Spa Receipt For: 2014 Election Cycle-to-Date Primary General Fair Carlo Salva Con Lagrange 500.00 Other (specify) . Bergin Brage Millers James Consent Brage Jones Berger Bergin (Arrent Bergin)

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

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

755.00

Brein Brengt in gertlyn i Gweith, i'r brein fan 🐮 🕠 🗇

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 119 (check only one) 11a 11b 11c 11d 12 X 13a 13b 14 15
Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions eto solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	·	
Full Name (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave. City	State Zip Code	Date of Receipt M M M / D D D / Y Y Y Y 10 08 2013 Transaction ID: SA13A.4448
Absecon FEC ID number of contributing federal political committee. Name of Employer Apple Inc. Receipt For: 2014 Primary General Other (specify)	NJ 08201 C H2NJ02128 Occupation Genius Admin Election Cycle-to-Date 2819.34	Amount of Each Receipt this Period Amount of Each Receipt this Pe
Full Name (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave. City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y 10 09 2013 Transaction ID : SA13A.4449
Absecon FEC ID number of contributing federal political committee. Name of Employer Apple Inc. Receipt For: 2014 Primary General Other (specify)	NJ 08201 C H2NJ02128 Occupation Genius Admin Election Cycle-to-Date 2845.16	Amount of Each Receipt this Period 25.82
Full Name (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave. City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y 10 15 2013 Transaction ID: SA13A.4475
Absecon FEC ID number of contributing federal political committee.	NJ 08201 C H2NJ02128	Amount of Each Receipt this Period
Name of Employer Apple Inc. Receipt For: 2014 Primary General Other (specify)	Occupation Genius Admin Election Cycle-to-Date 2885.16	The second secon
SUBTOTAL of Receipts This Page (optional)		102.10
TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 119 (check only one) 11a						
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			erson for the purpose of soliciting contributions						
	Citizens for Mike Assad, Inc.									
A.	Full Name (Last, First, Middle Initial) Mike Assad			Date of Receipt						
	Mailing Address 106 Minnetonka Ave.	State	Zip Code	10 22 2013						
	Absecon	NJ	08201	Transaction ID : SA13A.4476						
	FEC ID number of contributing federal political committee.	C H2	NJ02128	Amount of Each Receipt this Period						
	Name of Employer Apple Inc.	Occupation Genius Adr		23.00 mg/s of the continue of						
	Receipt For: 2014 Primary General Other (specify)	i. D anisid ia milan	ycle-to-Date 2908.16							
В.	Full Name (Last, First, Middle Initial) Mike Assad		,	Date of Receipt						
Ma	Mailing Address 106 Minnetonka Ave.			Мум / ББ / У У У У 1 V 10 26 2013						
	Absecon	State NJ	Zip Code . 08201	Transaction ID : SA13A.4477						
	FEC ID number of contributing federal political committee.	C H2I	1300 128 1300 128	Amount of Each Receipt this Period						
	Name of Employer	Occupation Genius Adn		31.85						
	Apple Inc. Receipt For: 2014	<u> </u>	ycle-to-Date	\dashv						
	Primary General Other (specify)	entra program	2940.01							
<u> </u>	Full Name (Last, First, Middle Initial) Mike Assad			Date of Receipt						
J.	Mailing Address 106 Minnetonka Ave.			M M / / 6 6 / / Y Y Y Y Y 10 10 27 2013						
	City Absecon	State NJ	Zip Code 08201	Transaction ID: SA13A.4478						
	FEC ID number of contributing federal political committee.	C H2	NJ02128	Amount of Each Receipt this Period						
	Name of Employer	Occupation		158.00 Luna Rosa Januaria II. Society and the second of th						
	Apple Inc. Receipt For: 2014	Genius Adr		4						
	Primary General Other (specify)	en er og skalende skriver	ycle-to-Date 3098.01 پهرين الهرين							
s	UBTOTAL of Receipts This Page (optional)			212.85						
7	OTAL This Period (last page this line number of	only)		्री Secure Period and Secure 19 of the Secure Period Secure Period Secure Period Secure Period Secure Period Secure						

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 119 (check only one)
		lay not be sold or used by any	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Citizens for Mike A	Full)		
Full Name (Last, First, Mid Mike Assad	dle İnitial)		Date of Receipt
Mailing Address 106 Minne	etonka Ave.		11 29 2013
City Absecon	State NJ	Zip Code 08201	Transaction ID : SA13A.4479
FEC ID number of contributed rederal political committee	rting C H2	មម្រាលខ្លួល ខ្លួនសមុខសម្រាលខ្លួនស NJ02128 នាការ នៃនៅនេះសារ និងការ	Amount of Each Receipt this Period
Name of Employer Apple Inc.	Occupation Genius Adr		72.48 a. b. b. b. d. b. d. b. b. b. b. b.
Receipt For: 2014 Primary Ge Other (specify)	neral salas grazzas	ycle-to-Date 3170.49	
Full Name (Last, First, Mid B. Mike Assad	dle Initial)	Date of Receipt	
Mailing Address 106 Minne	etonka Ave.	мам / Б b / У з у п у 11 30 2013	
City Absecon	State NJ	Zip Code 08201	Transaction ID : SA13A.4480
FEC ID number of contribution federal political committee	g ::C	VJ02128	Amount of Each Receipt this Period
Name of Employer Apple Inc.	Occupation Genius Adn		11.99
Receipt For: 2014	Election C	ycle-to-Date 3182.48	24.5
Full Name (Last, First, Mid C. Mike Assad	dle Initial)		Date of Receipt
Mailing Address 106 Minne	etonka Ave.	4 - 1 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	12 09 2013
City Absecori	State NJ	Zip Code 08201	Transaction ID : SA13A.4481
FEC ID number of contribution federal political committee	C H2	NJ02128	Amount of Each Receipt this Period
Name of Employer Apple Inc.	Occupation Genius Adr	•	44.00
Receipt For: 2014 Primary Ge Other (specify)	neral <u> </u>	ycle-to-Date 3226.48	
SUBTOTAL of Receipts This	Page (optional)		128.47
TOTAL This Period (last pag	e this line number only)		· · · · · · · · · · · · · · · · · · ·

ITI	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 119 (check only one) 11a
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.			
Α.	Full Name (Last, First, Middle Initial) Mike Assad			Date of Receipt
Λ.	Mailing Address 106 Minnetonka Ave.		•	12 20 2013
	City Absecon	State NJ	Zip Code 08201	Transaction ID : SA13A.4482
	FEC ID number of contributing federal political committee.	C H2	NJ02128	Amount of Each Receipt this Period
	Name of Employer Apple Inc.	Occupation Genius Adr		50.00 பெருக்காசியாந்தை நேரு இரு இரு இரு இரு இரு
	Receipt For: 2014 Primary General Other (specify)	grave y in nya.	ycle-to-Date 3276.48	
— В.	Full Name (Last, First, Middle Initial) Mike Assad			Date of Receipt
Ь.	Mailing Address 106 Minnetonka Ave.			12 26 2013
	City Absecon	State NJ	Zip Code 08201	Transaction ID : SA13A.4484
	FEC ID number of contributing federal political committee.	C H2	NJ02128	Amount of Each Receipt this Period
	Name of Employer	Occupation		200.00
	Apple Inc.	Genius Adr	min	_
	Receipt For: 2014 Primary General Other (specify)	n yenyi. F	ycle-to-Date 3476.48	
<u> </u>	Full Name (Last, First, Middle Initial) Mike Assad			Date of Receipt
U .	Mailing Address 106 Minnetonka Ave.			M M / D 0 / Y Y Y Y 12 12 30 2013
	City Absecon	State NJ	Zip Code 08201	Transaction ID : SA13A.4486
٠	FEC ID number of contributing federal political committee.	C ℍ2	ि कुं को अनुमान के सुर्वात के सुर्वात के स्थापन के NJ02128 कार्यों के स्थापन क	Amount of Each Receipt this Period
	Name of Employer Apple Inc.	Occupation Genius Ada		19.95
	Receipt For: 2014 Primary General Other (specify)	ratifik i sakan	ycle-to-Date 3496.43	
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			269.95 713.37

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 119 (check only one)
			person for the purpose of soliciting contributions are to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	•		
Full Name (Last, First, Middle Initial)			
A. Ooshirts Mailing Address 64 Shattuck Sq			Date of Receipt
City	State	Zip Code	12 10 2013
Berkeley	CA	94704	Transaction ID : SA14.4694
FEC ID number of contributing federal political committee.	\mathbf{C}	angan ngo e ngo sengurang manganas h antana da mathamatan atamantan sa	Amount of Each Receipt this Period
Name of Employer	Occupation	n	Promotional Supplies - Partial Refund
Receipt For: 2014 Primary General Other (specify)	, und ug kudiget i	cycle-to-Date	[MEMO ITEM]
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M / D HD / Y NY Y NY
City	State	Zip Code	The state of the s
FEC ID number of contributing federal political committee.	'C	en e	Amount of Each Receipt this Period
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify)	คลาย เมื่อขาคาร ถึง ค	cycle-to-Date വഴുന്ന ഇവളത്തുന്നുവഴുത്തുകളെ വ	£ .
Full Name (Last, First, Middle Initial)			
C. Mailing Address	· · · · · · · · · · · · · · · · · · ·	44	Date of Receipt
City	State	Zip Code	Generalista de la companya del companya del companya de la company
FEC ID number of contributing federal political committee.	C	and a construction of the	Amount of Each Receipt this Period
Name of Employer	Name of Employer Occupation		is Frankligardina (Parakana) a afaradh a Air (1977)
Receipt For: Primary General Other (specify)	A STATE OF THE STA	ycle-to-Date	
SUBTOTAL of Receipts This Page (optional))		

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

NAME OF COMMITTEE (In Full)

Mailing Address 448 S Hill St

Purpose of Disbursement

A. 3dna Corp.

Los Angeles

Website Fee

Office Sought:

State:

Candidate Name

Mike Assad

NJ

3dna Corp.

City

Full Name' (Last, First, Middle Initial)

Suite 200

House

Senate

District:

Suite 200

Full Name (Last, First, Middle Initial)

Mailing Address 448 S Hill St

President.

02

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

PAGE 11 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 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. Citizens for Mike Assad, Inc. Date of Disbursement `MUMT / TOWN / HY BY FAR State Zip Code Amount of Each Disbursement this Period CA 90013 , market for fraction than the state of . செரியல் வேண்டம் இரு இருந்த அரசு இரு இரு ansaction ID - கொளி er egerrenge een Transaction ID: SB17.4535 Burn 2 8.2. Category/ Type Disbursement For: 2014 X Primary General Other (specify) Date of Disbursement M M J D D / Y State Zip Code Amount of Each Disbursement this Period CA 90013

	ros vildaies	OA 90013		The property of the fill of the control of the cont
	Purpose of Disbursement Website Fee		70.273828	158.00 Transaction ID : SB17.4690
	Candidate Name Mike Assad		Category/ Type	[MEMO ITEM]
	Office Spught: House Senate	Disbursement For: 2014 Primary General		
	President	Other (specify)		
_	State: NJ District: 02			
	Full Name (Last, First, Middle Initial)	•		
, .	3dna Corp.			Date of Disbursement
	Mailing Address 448 S Hill St Suite 200			12 21 ,2013
	City	State Zip Code		Amount of Each Disbursement this Period
	Los Angeles	CA 90013		
	Purpose of Disbursement Website Fee			29.00
	Candidate Name		Category/	Transaction ID : SB17.4700
	Mike Assad		Type	[MEMO ITEM]
	Office Sought: X House	Disbursement For: 2014	·	[
	Senate	Primary General		
	State: NJ District: 02	Other (specify)		
S	SUBTOTAL of Disbursements This Page	(optional)		158.00

PAGE 12 OF 119 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b **Detailed Summary Page** 20a 20h 20c 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 eommittee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc. Full Name (Last, First, Middle Initial) A. American Conservative Union Date of Disbursement Mam / Dap / A A A A A A A 25 2013 Mailing Address 1331 H St NW Suite 500 City State Zip Code Amount of Each Disbursement this Period Washington 20005 The section of the se Purpose of Disbursement Conference Registration Fee 250.00 with the same of t henelle schreiten ikreicher Frags. L. . Transaction ID: SB17.4705 Buckley Candidate Name Category/ Mike Assad Type [MEMO ITEM] Disbursement For: 2014 Office Sought: House X Primary General Senate Other (specify) President 02 State: District: Full Name (Last, First, Middle Initial) Capital One, N.A. Date of Disbursement M M / D D Mailing Address PO Box 71083 10 2013 10, City State Zip Code Amount of Each Disbursement this Period NC Charlotte 28272 يا المركب و الأوروب في المستوالية المنظمة Purpose of Disbursement Credit Card Payment 250.00 بتعديد وإلا تنسورت hankunderiserakan ibenisah mendelik Transaction ID: SB17.4571 Candidate Name Category/ Mike Assad Type Office Sought: Disbursement For: House 2014 Primary General Senate Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Capital One, N.A. M M / D D / Y Y Y Mailing Address PO Box 71083 City State Zip Code Amount of Each Disbursement this Period Charlotte NC 28272 compressive and any and an experience of the control of the contro Purpose of Disbursement 31.00 Credit Card Payment Carried Committee Committe Transaction ID: SB17.4572 Candidate Name Category/ Mike Assad Type Office Sought: House Disbursement For: 2014 Primary General Senate Other (specify) President NJ District: 02 State: Comprehensive and the state of 281.00 SUBTOTAL of Disbursements This Page (optional)..... i de la compansa del compansa del compansa de la co

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

. Sama Barra Bar

13 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 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) Citizens for Mike Assad, Inc. Full Name" (Last, First, Middlé Initiat) A Capital One, N.A. Date of Disbursement M & M / D & D / V TY TY IV Mailing Address PO Box 71083 Zip Code State Amount of Each Disbursement this Period NC 28272 endandenfendanta (4 m.) (4 m.) Charlotte Purpose of Disbursement Credit Card Payment また終日の整元は**ま**いと発展された。**ず**という。 Transaction ID: SB17.4575 Candidate Name Category/ Mike Assad Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President State: N.J District: 02 Full Name (Last, First, Middle Initial) Capital One, N.A. Date of Disbursement AMT / DED. / TYPY YEY Mailing Address PO Box 71083 20 2013 City State Zip Code Amount of Each Disbursement this Period NC Charlotte 28272 ϕ in the property of the ϕ . The ϕ is the ϕ in ϕ in ϕ is ϕ in ϕ . Purpose of Disbursement Credit Card Payment Transaction ID: SB17.4576 Candidate Name Category/ Mike Assad Type Office Sought: House Disbursement For: 2014 Senate Primary General Other (specify) President District: 02 Full Name (Last, First, Middle Initial) Date of Disbursement c. Capital One, N.A. M M / D D / Y Y Y Mailing Address PO Box 71083 City State Zip Code Amount of Each Disbursement this Period Charlotte NC 28272 Jameskansky – my malona såra "Kurstå m. K. 200.00 Purpose of Disbursement Credit Card Payment San State Confirmation of the Confirmation of Transaction ID : SB17.4577 on: Server Candidate Name Category/ Mike Assad Type Office Sought: Disbursement For: 2014 House Primary General Senate Other (specify) President State: NJ District: 02 285.00 SUBTOTAL of Disbursements This Page (optional).....

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

zazelbannya filozofi oz osobbe, poslik za ji z nashka osobi z

FOR LINE NUMBER: PAGE 14 OF 119 Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20h 20c 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) Citizens for Mike Assad, Inc. Full Name (Last, First, Middle Initial) A. Facebook, Inc. Date of Disbursement MEM / POST / YEYEYEY Mailing Address 1601 Willow Rd City State Zip Code Amount of Each Disbursement this Period Menlo Park 94025 in karan karan karan karan in inga sa Purpose of Disbursement Advertisements rang ayan in Sandraking. Kurikin Finiski in Grandiy. 004 Transaction ID : SB17.4450 S. 15 1 7 Candidate Name Category/ Mike Assad Type Disbursement For: 2014 Office Sought: House Primary Senate General Other (specify) President NJ 02 State: District: Full Name (Last, First, Middle Initial) Facebook, Inc. Date of Disbursement M M / D D / Y Y Y Mailing Address 1601 Willow Rd 09 City State Zip Code Amount of Each Disbursement this Period Menlo Park CA 94025 കാ**ംഗൂന്നും ഗു**ന്നും ആവരുന്നു വരുന്നു വരു Purpose of Disbursement Advertisements agranayaan (water in the desired A. A. i. . 004 004 -2 - 1 Transaction ID : SB17.4451 Candidate Name Category/ Mike Assad Type Office Sought: Disbursement For: House 2014 Primary Senate General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Facebook, Inc. M M / D D / Y Y Y Y Mailing Address 1601 Willow Rd Zip Code City State Amount of Each Disbursement this Period Menlo Park CA 94025 and the second of the second o Purpose of Disbursement 40.00 lan dasa kara tang menjamban karata sa ta Advertisements Transaction ID: SB17.4688 السيدون سياق Candidate Name Category/ Mike Assad Type [MEMO ITEM] Office Sought: House Disbursement For: 2014 Primary General Senate **President** Other (specify) State: NJ District: 02 62.10 SUBTOTAL of Disbursements This Page (optional)......

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

البقاء ساجا أتبدي ساعا وأقسطتهي ساغظ لهمتك بالأشسطي مماشها والإسمامي

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statem			
or for commercial purposes, other than using the nam NAME OF COMMITTEE (in Full) Citizens for Mike Assad, Inc.	e and address of any political commi	ittee to salicit contributions from such committee.	
Full Name" (Last, First, Middle Initial) A. Facebook, Inc. Mailing Address 1601 Willow Rd		Date of Disbursement M M / D D / V Y Y Y 10 13 2013	
Menlo Park C. Purpose of Disbursement	guerragen eg s	Amount of Each Disbursement this Period	
	Category Type	Transaction ID : SB17.4689	
State: NJ District: 02 Full Name (Last, First, Middle Initial)	Primary General Other (specify)		
B. Facebook, Inc. Mailing Address 1601 Willow Rd		Date of Disbursement M M / D M D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1	
	cate Zip Code CA 94025 Categor Type	Transaction ID : SB17.4532	
Senate X F	ent For: 2014 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) C. Facebook, Inc. Mailing Address 1601 Willow Rd	Facebook, Inc.		
City State Menlo Park CA Purpose of Disbursement	Zip Code 94025	Amount of Each Disbursement this Period	
Candidate Name Mike Assad	Categor Type	Transaction ID : SB17.4533	
	Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional)		63.00 :	

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

PAGE 16 OF 119 FOR LINE NUMBER: (check only one) Use separate schedule(s)

ITI	EMIZED DISBURSEMENTS	for each category Detailed Summary		×	17 20a		18 20b	-1	19a · 20c	19b 21				
	y information copied from such Reports and Statements r for commercial purposes, other than using the name and				he purp		of solic	iting	contribu	utions				
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
\rangle	Citizens for Mike Assad, Inc.													
	Full Name' (Last, First, Middlé Initial)			Data	of Disbu	Irec	ment							
۹.	Facebook, Inc.			M /			γ ů v	royuni	, .					
	Mailing Address 1601 Willow Rd				k g es macro									
	City State Menio Park CA		1	nt of Ea										
	Purpose of Disbursement Advertisements		ere ^g iiki s i				25.8							
	Candidate Name		Category/		ction ID				•					
	Mike Assad		Type	IMEM	O ITEM	1								
	Office Sought: House Disbursement For Senate Primary Other (y	-	<u></u>	,,									
	State: NJ District: 02													
В.	Full Name (Last, First, Middle Initial) Facebook, Inc.				of Disbu			d til set.	. 100					
	Mailing Address 1601 Willow Rd					M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City State Menlo Park CA	•						Amount of Each Disbursement this Period						
	Purpose of Disbursement					30.70								
	Advertisements Candidate Name	Category	Transaction ID : SB17.4699											
	Mike Assad		Category/ Type	[MEM	O ITEM	ı								
	Office Sought: Senate Disbursement Formary													
	Full Name (Last, First, Middle Initial)				-									
C.	Facebook, Inc.			Date of Disbursement										
	Mailing Address 1601 Willow Rd			M 12		2			013					
	•	ip Code 94025		1	nt of Ea			-	_					
	Purpose of Disbursement Advertisements	31023	Secretary of Secretary	ž.					33.	54				
	Candidate Name		Category/	Transac						,				
	Mike Assad		Туре	[MEM	O ITEM]									
	State: NJ District: 02	· · · · · · · · · · · · · · · · · · ·		<u> </u>										
_				÷	end mande				0.0	nn				
S	UBTOTAL of Disbursements This Page (optional)			::::::: ::::::::::::::::::::::::::::::	on in Marconsi y in s i k ^{or o} k k	m, riki K	n de la company	99.8 71.8	. B 2.	: 1				
T-	OTAL This Period (last page this line number only)													

PAGE 17 OF 119 FOR LINE NUMBER: Use separate schedule(s) (check only one)

ITEMIZED DISBURSEMENTS	for each categor Detailed Summa				19b					
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and				the purp		of solic	iting cont	ributions		
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		,								
Full Name" (Last, First, Middle Initial) A. Facebook, Inc. Mailing Address 1601 Willow Rd		Date of Disbursement M M / D D / V V V V V V V V V V V V V V V V								
City State Menlo Park CA Purpose of Disbursement Advertisements	Zip Code 94025	Harris St.				и 13 г. — ў я 15 г. — ў	الإساق بي			
Candidate Name Mike Assad Office Sought: House Senate President State: NJ District: 02	Married Marrie	Category/ Type	[MEN	IO ITEM]	I					
Full Name (Last, First, Middle Initial) OOShirts Mailing Address 64 Shattuck Sq		1	. M	of Disbu	D n	и D , /	y 1 y 1 y 2013	6° y		
City State Berkeley CA Purpose of Disbursement Promotional Supplies Candidate Name Mike Assad	Zip Code 94704	Category/	Transa	ction ID	: SE	nedeze j e	<u> </u>	18.40		
Office Sought: House Disbursement Formation		Туре	_ [MEN	IO ITEM	J					
Full Name (Last, First, Middle Initial) C. United States Postal Service Mailing Address 475 L'Enfant Plaza SW				of Disbu	D	D /	v * v = v 2013	a ny en .		
	Zip Code 20260				Amount of Each Disbursement this Period 5.05 Transaction ID: SB17.4687					
Office Sought: House Disbursement Fo		Туре	_ [MEN	IO ITEM]	1					
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	versiõre e s		aca Basa Sa	25.3 . 9 2	0.00		

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

The straight with the straight of the straight

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SB17 Transaction ID: SB17.4687

Credit Card Charge

Form/Schedule: Transaction ID:

PAGE 19 OF 119 FOR LINE NUMBER: Use separate schedule(s) (check only one)

TEMIZED DISBURSEMENTS	for each category Detailed Summary		X 17 18 19a 19b 20a 20b 20c 21				
Any information copied from such Reports and Statements or for commercial purcoses, other than using the name and	may not be sold or us a address of any politic	sed by any per cal committee	son for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.							
Full Name' (Last, First, Middle Initial) A. United States Postal Service			Date of Disbursement				
Mailing Address 475 L'Enfant Plaza SW	Zin Codo		11 29 2013				
City State Washington DC	Zip Code 20260		Amount of Each Disbursement this Period				
Purpose of Disbursement Candidate Name Mike Assad		Category/ Type	400.00 Transaction ID : SB17.4557				
Office Sought: House Disbursement F Senate Prima	positivity	,урс					
Full Name (Last, First, Middle Initial) United States Postal Service Mailing Address 475 L'Enfant Plaza SW	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City State	Zip Code		Amount of Each Disbursement this Period				
Washington DC Purpose of Disbursement	20260		28.85				
Postage Candidate Name Mike Assad	·	Category/ Type	Transaction ID : SB17.4703 [MEMO ITEM]				
Office Sought: House Disbursement F			· · · · · · · · · · · · · · · · · · ·				
Full Name (Last, First, Middle Initial) C.			Date of Disbursement				
Mailing Address			M M / D D / Y V V V				
City State	Zip Code		Amount of Each Disbursement this Period				
Purpose of Disbursement Candidate Name		Category/ Type	Leadershallandardardardardardardardardardardardardard				
Office Sought: House Senate President State: Disbursement F Prima Other		-					
SUBTOTAL of Disbursements This Page (optional)			400.00				
TOTAL This Period (last page this line number only)		_	ு பாது மாதாக இடைநாக நாக நிரை நூரி ஆ 1249.10 ஆத்திரைக்கோ நிரைக்கூரின்ற நோக சோக்கோ நிரை				

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 119 (check only one) 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and	nay not be sold or used by any address of any political commit	person for the purpose of soliciting contributions the to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		
Full Name' (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave.		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Absecon NJ Purpose of Disbursement Candidate Name Mike Assad	Zip Code 08201	Transaction ID : SB19A.4452
Office Sought: House Disbursement For	General	
Full Name (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave.		Date of Disbursement 10 28 2013
City State Absecon NJ Purpose of Disbursement	Zip Code 08201	Amount of Each Disbursement this Period 9.20 Transaction ID: SB19A.4455
Candidate Name Mike Assad Office Sought: House Senate President Other (s	General	
State: NJ District: 02 Full Name (Last, First, Middle Initial) Mike Assad Mailing Address and Minnetonic Ave		Date of Disbursement
	General	Transaction ID : SB19A.4456
SUBTOTAL of Disbursements This Page (optional)		24.20

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and State								
or	for commercial purposes, other than using the name and a NAME OF COMMITTEE (in Full) Citizens for Mike Assad, Inc.	address of any pol	itical committe	e to solicit contributions from such committee.				
Α.	Full Name (Last, First, Middlé Initial) Mike Assad			Date of Disbursement				
	Mailing Address 106 Minnetonka Ave. City State	Zip Code		Amount of Each Disbursement this Period				
	Absecon NJ	08201		Programme Telephone Control of the C				
	Purpose of Disbursement Candidate Name Mike Assad		Category/ Type	10.00				
	Office Sought: House Disbursement For	General						
В.				Date of Disbursement				
	Mailing Address 106 Minnetonka Ave.			10 28 2013				
	City State							
	Absecon NJ	Zip Code 08201		Amount of Each Disbursement this Period				
	Purpose of Disbursement		15.00					
	Candidate Name Mike Assad		Category/ Type					
	Office Sought: House Disbursement For	General	1 lype	_				
	Full Name (Last, First, Middle Initial)							
C.	Mike Assad			Date of Disbursement				
	Mailing Address 106 Minnetonka Ave.			10 28 7 2013				
		p Code		Amount of Each Disbursement this Period				
	Absecon NJ 0 Purpose of Disbursement Loan Payment	98201	009	16.96				
	Candidate Name Mike Assad	.	Category/ Type	Transaction ID : SB19A.4459				
	Office Sought: House Disbursement For	General	<u> </u>					
s	UBTOTAL of Disbursements This Page (optional)			41.96				
Т	OTAL This Period (last page this line number only)			Secretary of Secretary Secre				

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 119 (check only one) 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	nay not be sold or used by any address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		
Full Name (Last, First, Middlé Initial)		Data of Sisterna and
Mike Assad	Date of Disbursement	
Mailing Address 106 Minnetonka Ave.		10 28 2013
City State Absecon NJ	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement	08201	17.41
Loan Payment Candidate Name	Category	Transaction ID : SB19A.4460
Mike Assad Office Sought: House Disbursement For	Type 7014	
Office Sought: House Disbursement For Senate President Other (s	General	
State: NJ District: 02		
Full Name (Last, First, Middle Initial) Mike Assad		Date of Disbursement
Mailing Address 106 Minnetonka Ave.		M M / P P / Y Y Y Y Y Y 10 Y 10 Y 10 Y 10 Y 10 Y
City State	Zip Code	Amount of Each Disbursement this Period
Absecon NJ Purpose of Disbursement	08201	17.95
Loan Payment	009	4 Land of Brand Brand Brand Mension Street Process of the Setting
Candidate Name Mike Assad	Category Type	′
Office Sought: House Disbursement For	General	
Full Name (Last, First, Middle Initial)		
Mike Assad		Date of Disbursement
Mailing Address 106 Minnetonka Ave.		10 / D / V V V V V V V V V V V V V V V V V
	ip Code 08201	Amount of Each Disbursement this Period
Purpose of Disbursement	009	19.00
Candidate Name Mike Assad	Category Type	Transaction ID : SB19A.4462
Office Sought: House Disbursement For	r: 2014	
Senate Primary Other (s	L	
State: NJ District: 02		A receive and executable of secularities for and in the configuration of
SUBTOTAL of Disbursements This Page (optional)		54.36
TOTAL This Period (last page this line number only)		de Englishe werdenmental in interference (all in the control of t

CHEDULE B (FEC Form 3) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 OF 119 (check only one) 17 18 X 19a 19b 20a 20b 20c 21							
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and	nay not be sold or used by any address of any political committed	person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	Citizens for Mike Assad, Inc.								
Full Name' (Last, First, Middlé Initiai) Mike Assad		Date of Disbursement							
Mailing Address 106 Minnetonka Ave.		10 28 2013							
City State	Zip Code	Amount of Each Disbursement this Period							
Absecon NJ	08201	timens on Amerikanskanski Sprink until 19							
Purpose of Disbursement Loan Payment	009	🍦 📗 และเหมืองภูพิมเมณิเมณิสัสเกษิว (ริเกษ ซิกษ ซิกษ ซิกษ 🤊							
Candidate Name Mike Assad	Category/ Type								
Office Sought: House Disbursement For Senate President Disbursement For Other (s	r: 2014 General								
State: NJ District: 02 Full Name (Last, First, Middle Initial)									
·		Date of Disbursement							
Mailing Address		and the state of t							
City State	Zip Code	Amount of Each Disbursement this Period							
Purpose of Disbursement		 {							
Candidate Name	Category/ Type	XX.							
Office Sought: House Senate President Disbursement Formary Other (s	r: General								
State: District:									
Full Name (Last, First, Middle Initial)		Date of Disbursement							
Malling Address		Mam / Dab / Vovey							
City State Z	ip Code	Amount of Each Disbursement this Period							
Purpose of Disbursement		Santan Paratamenta and and and and							
Candidate Name	Category/ Type								
Office Sought: House Disbursement Formary	General								
SUBTOTAL of Disbursements This Page (optional)		19.00							
TOTAL This Period (last page this line number only)		139.52 							

Use separate schedule(s) FOR LINE NUMBER:

PAGE 24 OF 119

X	13a
	13b

DANS					category of the Summary Page		check only one) ×	13a 13b
AME OF COMMITTEE (In Ful Ditizens for Mike Assa	•			"	Transac	tion ID :	SC/10.4183		<u> </u>
LOAN SOURCE Full Nam Mike Assad		dle Initial)		[PERSONA	AL FUNDS]	X Pri	n: 2014 imary eneral		
Mailing Address 106 Minnetonka Ave.						Ot	her (specify) 🔻	,	
City		State	ZIP Code			<u> </u>			
Absecon		NJ	08201						
Original Amount of Loan	75.00	Cumulative Pa	or Marchelland State	asternal all	region of the	a. ar ⊹. <u>a</u>	standing at Clo	7" 6 · 4	•
Date Incurre	Ž013	M M M / (D)		Vone	Interest Rate		% (apr)	Secured:	⊠ _{No}
List All Endorsers or Gua		Loan Source							
1. Full Name (Last, First,	Middle Initial)			Name of Em	ployer				
Mailing Address				Occupation					
City	State	ZIP Code	-	Amount Guaranteed Outstanding:	!!		ng ar in		1
2. Full Name (Last, First, N	Middle Initial)			Name of Em	ployer				
Mailing Address				Occupation				····	
City	State	ZIP Code		Amount Guaranteed Outstanding:	j.				1.
3. Full Name (Last, First, N	Middle Initial)			Name of Em	ployer		*******		
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:					
4. Full Name (Last, First, N	Middle Initial)			Name of Em	ployer				
Mailing Address			_,_,_	Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding		-	ngragiang nga		
SUBTOTALS This Period This	s Page (optional)				· • #		enzgwenge zer	75.0	27 2 7
OTALS This Period (last page	ge in this line only)				* * *	, 5 to 3 - 12, 1		• .
Carry outstanding balance or	nly to LINE 3, Sch	edule D, for th	is line. If n	o Schedule	D, carry for	ward to	appropriate li	ne of Sum	·mary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 25 OF 119

LOANS		for each category of the Detailed Summary Pag	
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	,	Transac	tion ID : SC/10.4185
LOAN SOURCE Full Name (Last, First, Middle Mike Assad Mailing Address 106 Minnetonka Ave.	le Initial)	[PERSONAL FUNDS]	Election: 2014 X Primary General Other (specify) ▼
City	State ZIP Cod	de	
Absecon	NJ 08201		
Original Amount of Loan 34.81	d.	0.00	34.81
	Sand broken Cord	Interest Rate	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Loan Source	Name of Employer	
	<u></u>		
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	Managanaganaganaganaganaganaganaganagana
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	ngang mg saga aga gang aga.
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	ng sagangan garagang ng asyar ng Ladha sharika Aladha Arada
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	orige i engravango inagran ingi inagran girin ingi inakya. Alaman Paman Banan Banan Banan Banan Banan Banan (Banan Banan)
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only).)	34.81 Leading to group the group of the second of the sec

Use separate schedule(s) for each category of the

PAGE 26 OF 119

FOR LINE NUMBER:

LOANS			ed Suramary Page		X 13a 13b
NAME OF COMMITTEE (In Fu			Transact	tion ID : SC/10.4188	
LOAN SOURCE Full Nam Mike Assad	ne (Last, First, Middle Initial)	[PERS	ONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.				Other (specify)	
City	State	ZIP Code			
Absecon	NJ	08201			
Original Amount of Loan	Cumulativ 17.41	ve Payment To Date		nce Outstanding at Close of	0.00
TERMS Date Incur	ed	Date Due	Interest Rate	% (apr)	red: /es No
	arantors (if any) to Loan So				
1. Full Name (Last, First,	Middle Initial)	Name of	Employer	-	
Mailing Address		Occupati	ion		
City	State ZIP Coo	de Amount Guarante Outstand	ed	e gran gerong strugt mag in sept.	.:
2. Full Name (Last, First,	Middle Initial)	Name of	Employer		
Mailing Address		Occupati	ion		A
City	State ZIP Coo	Amount Guarante Outstand	ed		1.
3. Full Name (Last, First,	Middle Initial)	Name of	Employer		
Mailing Address		Occupati	ion		
City	State ZIP Cod	Amount Guarante Outstand	ed		x
4. Full Name (Last, First,	Middle Initial)	Name of	Employer		
Mailing Address		Occupati	ion		
City	State ZIP Coo	Amount Guarante Outstand	ed	ngenng in genergenng ang milipining i Demikan Bewillenkan Armili.	
SUBTOTALS This Period Th	is Page (optional)			and the second s	0.00
TOTALS This Period (last pa	ge in this line only)				
Carry outstanding balance	only to LINE 3. Schedule D. fe	or this line. If no Sched	ule D. carry forw	ard to appropriate line of	Summary

Use separate schedule(s) | FOR LINE NUMBER:

PAGE 27 OF 119

DANS		for each category of the Detailed Summary Pag	
AME OF COMMITTEE (In Full)	<u> </u>	Transac	etion ID : SC/10.4186
Citizens for Mike Assad, Inc.	dalla latkiaN		
LOAN SOURCE Full Name (Last, First, Mic Mike Assad	adie initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP Cod	 de	
Absecon	NJ 08201		
Original Amount of Loan 43.72	Cumulative Payment To	000	Ance Outstanding at Close of This Period
TERMS Date Incurred M03 / P20 / Y 2013	Date Oue	None 0.00	g wagen og
List All Endorsers or Guarantors (if any) t	o Loan Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	TTGがTAGERやTOLEMENT TAGET LAGEL LAGE LA ラ ・ 選集に乗り、対策の機能に関する場合。また、また。
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	i og magen i og meg i valgen algen og kritige av et i Store Base Base ett sæmte sæmte er fra i fler
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Initial)		Name of Employer	·
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	and from the control of the control
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line only		• 10 miles	43.72

Use separate schedule(s) FOR LINE NUMBER

PAGE 28 OF 119

DANS					category of the Suremary Pag	e (chec	k only one)	×	13a 13b
AME OF COMMITTEE (In Fu Citizens for Mike Assa				.	Transac	tion ID : SC/	10.4187	L	
LOAN SOURCE Full Nam Mike Assad	ne (Last, First, Midd	dle Initial)		[PERSONA	L FUNDS]	Election: Primar Genera	у		
Mailing Address 106 Minnetonka Ave.						Other	(specify) ▼		
City		State	ZIP Code				·····		
Absecon		NJ	08201						
Original Amount of Loan	19.00	Cumulative Pay	\$1. redfinner≻	ൂം ചുന്നു നുന്നു. 19 വ	* 1		ding at Close o	<u></u>	· · ·
	Ž013 Y	A N / D D	Pate Due	Vone	Interest Rate		Secu	red: ⁄es	⊠ _{No}
List All Endorsers or Gua 1. Full Name (Last, First,		Loan Source		Name of Em	ployer				
i. Full Name (Last, First,	wilddie initial)			Name or Em	pioyer				
Mailing Address				Occupation		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,			
City	State	ZIP Code		Amount Guaranteed Outstanding:	:		N Charles of the Company of the Comp		
2. Full Name (Last, First, I	Middle Initial)	· · · · · · · · · · · · · · · · · · ·		Name of Em	ployer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:	700				
3. Full Name (Last, First, I	Middle Initial)			Name of Em	ployer				···
Mailing Address				Occupation		— · T - · · · · · · · · · · · · · · · · · · 	*************************************		
City	State	ZIP Code		Amount Guaranteed Outstanding:	Ú		15	į.	
4. Full Name (Last, First, I	Middle Initial)			Name of Em	ployer				
Mailing Address	·			Occupation		······································	- 		-
City	State	ZIP Code		Amount Guaranteed Outstanding:			nger og et specerete.	ţ,	
SUBTOTALS This Period Thi							seria decenti de constitución	0.00	• 0
rOTALS This Period (last page					inq m#				••
Carry outstanding balance o	nly to LINE 3, Scho	edule D, for this	s line. If no	Schedule I	D, carry forw	ard to appi	opriate line of	Sumn	nary.

Use separate schedule(s)

PAGE 29 FOR LINE NUMBER:

119

OANS			for each category of Detailed Summary Pa		13a
AME OF COMMITTEE (In Fi	•		Transa	oction ID : SC/10.4189	t. I
LOAN SOURCE Full Nam Mike Assad Mailing Address 106 Minnetonka Ave.	me (Last, First, Middle	Initial)	[PERSONAL FUNDS]	Election: 2014 ☐ Primary ☐ General ☐ Other (specify) ▼	
City	Star	te ZIP Coc	de		
Absecon	N	J 08201			
Original Amount of Loan	31.43	mulative Payment To	s onggan nggar paguan na prong 💎 igan.	lance Outstanding at Close of the company of the c	4 T
	Y 2013 Y		Interest Ra	te Secu	ured: X
List All Endorsers or Gu		an Source	N(5		
Full Name (Last, First)	, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State Z	IP Code	Guaranteed	an sagan agam agu saga an aga an agu an a De seithean tha adhtas at a stèin a tha	1
2. Fuli Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address	,		Occupation		
City	State Z	IP Code	Guaranteed		į
3. Full Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State Z	IP Code	Guaranteed		1
4. Full Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State Z	IP Code	Guaranteed	oranganagannyannagannagannyanagan 	
SUBTOTALS This Period Th				and the second s	g -4742-119
Carry outstanding balance	only to LINE 3, Schedu	le D, for this line. If r			

Use separate schedule(s) FOR LINE NUMBER:

PAGE 30 OF 119

DANS			for each category Detailed Summary		(check only one)	X 13a		
·	ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc.			Transaction ID : SC/10.4190				
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Mid	dle Initial)	[PERSONAL FUND:	SJ Ele	ction: 2014 Primary General			
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼			
City	· · · · · · · · · · · · · · · · · · ·	State Z	IP Code		•			
Absecon		NJ 0	18201 					
Original Amount of Loan	30.40	Cumulative Payme	0.00	'e - b	Outstanding at Close of	30.40		
TERMS Date Incurre	Ž013 Y	N M / D D	Due Interest	Rate 0.00	Secure % (apr)	ed: X		
List All Endorsers or Gua		Loan Source	Name of Employer					
1. Full Name (Last, First,	wilddie initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Guaranteed		ngming ingranga nga ngan ay awag wan igu k			
2. Full Name (Last, First, M	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Guaranteed		nge a ngamalka a galamika a galami	1.		
3. Full Name (Last, First, M	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Guaranteed		ng sangarang masapanaga magaran sakasa Sasai Pamahasa Sasai Sasai			
4. Full Name (Last, First, N	Middle Initial)		Name of Employer					
Mailing Address			Occupation		,			
City	State	ZIP Code	Guaranteed		ngin groeginngi op 12 m	1		
SUBTOTALS This Period This	s Page (optional)			Landanas	many and the second of the sec	30.40		
FOTALS This Period (last pag	ge in this line only)	·····	1	and the state of t			
Carry outstanding balance or	nly to LINE 3. Sch	edule D. for this li						

Use separate schedule(s) FOR LINE NUMBER:

PAGE 31 OF 119

DANS	·	Detailed Suramary Pag		13a 13b
AME OF COMMITTEE (In Full)		Transac	ction ID : SC/10.4191	
LOAN SOURCE Full Name Mike Assad		[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼	
City		P Code		
Original Amount of Loan	Cumulative Paymer	errove anna nan sing i erro	ance Outstanding at Close of The Control of the Con) .
Date Incurred	2013 Y M M / D D /	0.00 O	Establish in the second of the	:
List All Endorsers or Guar 1. Full Name (Last, First, N	antors (if any) to Loan Source	Name of Employer		
	made military			
Mailing Address		Occupation		
City	State ZIP Code	Guaranteed	en Sannisk i måttindern de inder i A. inder En Sannisk i måttindern de inder i A. i	1
2. Full Name (Last, First, M	iddle Initial)	Name of Employer		
Mailing Address	to do the second	Occupation		
City	State ZIP Code	Guaranteed	naganaganaganaganagan garaga nganasanasanasan sa nasan sa nasan	į
3. Full Name (Last, First, M	iddle Initial)	Name of Employer	- <u>1, 1, 1941-1945</u>	
Mailing Address		Occupation		
City	State ZIP Code	Guaranteed	engamagamagamagamagamaga engamaga engamagamaga engamagamagamagamagamagamagamagamaga engamaga engamaga engamaga	
4. Full Name (Last, First, M	iddle Initial)	Name of Employer		
Mailing Address		Occupation		
City	State ZIP Code	Guaranteed	erigen og en gunnger neg mig eringen og: Almalie vilke silke silke silke vilke vilke vilke vilke	:
	Page (optional)	<u> </u>	25 8	5.85
	y to LINE 3, Schedule D, for this lin	(h	ward to appropriate line of Su	

Use separate schedule(s)

PAGE 32 OF 119 FOR LINE NUMBER:

X	13a
	13h

DANS		Detailed Suramary Pag	
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	ction ID : SC/10.4192
LOAN SOURCE Full Name (Last, First Mike Assad	t, Middle initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City	State ZIF	² Code	
Absecon	NJ 08	201	
Original Amount of Loan Original Amount of Loan Original Amount of Loan 30.07		000	ance Outstanding at Close of This Pe and a magnitud streets a least a least 30.07
TERMS Date Incurred M 03 M / D 27 D / Y 2013 Y	I described to describ		
List All Endorsers or Guarantors (if a		Nome of Completor	•
1. Full Name (Last, First, Middle Initia	u)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Guaranteed	可能性を関する動作権・自由制定により、さり (3 49 -3-25-1 3 2- 46 -3 -2-3 - 47-3 - 47-3 - 47-3
2. Full Name (Last, First, Middle Initial))	Name of Employer	
Mailing Address	and and the state of the state	Occupation	
City . Sta	ate ZIP Code	Guaranteed	en China Commission (China China Chi
3. Full Name (Last, First, Middle Initial		Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address		Occupation	
City Sta	ate ZIP Code	Guaranteed	Sagarage and an agree of the sagarage of the s
4. Full Name (Last, First, Middle Initial))	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Guaranteed	negawigi nigi nigi wegawigi nigi nigi n
UBTOTALS This Period This Page (opti		•	30.07
OTALS This Period (last page in this lin		· · · · ·	agta a ta may of a justifier of the same

Use separate schedule(s) FOR LINE NUMBER:

PAGE 33 OF 119

DANS .			for each category of Detailed Suremary P	
AME OF COMMITTEE (In F			Trans	action ID : SC/10.4193
LOAN SOURCE Full Nat Mike Assad Mailing Address 106 Minnetonka Ave.		e Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify)
City	St	ate ZIP	Code	
Absecon		NJ 082	201	
	ragna y ragnaryes v	Cumulative Payment	ro grago a raciona na espera	alance Outstanding at Close of This Periods (1997)
·	Y 2013 Y 3 M 2		TATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN	ate Secured: 00 % (apr) Yes No
List All Endorsers or Gu 1. Full Name (Last, First		Loan Source	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	Constantine design of the state of the file of the state
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address	·		Occupation	
City	State	ZIP Code	Guaranteed	grangen gungungan gangen grang . S
SUBTOTALS This Period Th	is Page (optional)		· St. 198	48.30
FOTALS This Period (last pa	age in this line only)		<u> </u>	সামানু সামানুক্তার কুটা সংগ্রহণ সমূহক বিশ্বসাধার কুটা । বুটা বিশ্বসাধার নির্দেশ । বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার বিশ্বসাধার । বিশ্বসাধার বি
Carry outstanding balance	only to LINE 3, Sched	lule D, for this line	. If no Schedule D, carry fo	prward to appropriate line of Summary.

Use separate schedule(s) FOR LINE NUMBER:

PAGE 34 OF 119

LOANS		for each category of the Detailed Suramary Pag	
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4229
LOAN SOURCE Full Name (Last, First, Minimum Mike Assad Mailing Address	ddle Initial)	[PERSONAL FUNDS]	Election: 2014 X Primary General Other (specify) ▼
106 Minnetonka Ave.			
City	State ZIP Co	de	
Absecon	NJ 08201		
Original Amount of Loan 30.02	Cumulative Payment To	STANDARD BUTTON	nce Outstanding at Close of This Period ে বিভাগ্যাল বিশেষক সালেল্য 30.02
in the state of the form of the state of the		Interest Rate None 0.00	ki, ashir e
List All Endorsers or Guarantors (if any)	o Loan Source		
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	,	Occupation	
City State	ZIP Code	Guaranteed	regineras e reginnas en grecego majores. Ogravidas in tracigo y de la delivação de
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	regionegroupe in ordering in the con-
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	- Sangangangangangangangangan Diser asi Sangangangan kan gangan
SUBTOTALS This Period This Page (optional).			30.02
TOTALS This Period (last page in this line only	y)		maning along ming bid was been been been been been been been bee
Carry outstanding balance only to LINE 3, Sci	hedule D, for this line. If	no Schedule D, carry forw	ard to appropriate line of Summary.

			PAGE 35 OF 11
HEDULE C (FEC Form ANS	3)	Use separate sched for each category of Detailed Summary F	f the (check only one) X 13a
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc).	Trans	saction ID : SC/10.4232
LOAN SOURCE Full Name (Last, Mike Assad	First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		· · · · · · · · · · · · · · · · · · ·	Other (specify)
City	State ZI	P Code	
Absecon	NJ 0	3201	
Original Amount of Loan	Cumulative Payme		alance Outstanding at Close of This Per
3	9.30	0.00	39.30
TERMS	D-A-	D	2
Date Incurred	Date		
01 2013		Y None Y	% (apr)
List All Endorsers or Guarantors	(if any) to Loan Source		
1. Full Name (Last, First, Middle	Initial)	Name of Employer	
	•		
Mailing Address		Occupation	
Mailing Address		Occupation	
Mailing Address	State ZIP Code	Amount Guaranteed	
	State ZIP Code	Amount	
City	State ZIP Code	Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle In	State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation	
City 2. Full Name (Last, First, Middle In	State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
City 2. Full Name (Last, First, Middle In Mailing Address	State ZIP Code nitial) State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
City 2. Full Name (Last, First, Middle In Mailing Address City	State ZIP Code nitial) State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle II Mailing Address City 3. Full Name (Last, First, Middle II Mailing Address	State ZIP Code nitial) State ZIP Code nitial)	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer	
City 2. Full Name (Last, First, Middle II Mailing Address City 3. Full Name (Last, First, Middle II Mailing Address City	State ZIP Code nitial) State ZIP Code nitial)	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle II Mailing Address City 3. Full Name (Last, First, Middle II Mailing Address	State ZIP Code nitial) State ZIP Code nitial)	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle II Mailing Address City 3. Full Name (Last, First, Middle II Mailing Address City	State ZIP Code nitial) State ZIP Code nitial)	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle III Mailing Address City 3. Full Name (Last, First, Middle IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	State ZIP Code nitial) State ZIP Code nitial)	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer	

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

TOTALS This Period (last page in this line only).....

u	7
4	ľ
4)
C)
¢	>
_	4
_	1
N	1
Œ)
ς	ľ
۳.	ı

SCHEDULE C (FEC F	orm 3)				PAGE 36	OF 119
LQANS	3 7		for each ca	te schedule(s) tegory of the mmay Page	FOR LINE NUMBER:	X 13a 13b
NAME OF COMMITTEE (In Full) Citizens for Mike Assad	, Inc.			Transaction	ID : SC/10.4233	
LOAN SOURCE Full Name	(Last, First, Mic	dle Initial)	[PERSONAL		ection: 2014	
Mike Assad				×	Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City		State ZIP	Code			
Absecon		NJ 082	201			
Original Amount of Loan	26.61	Cumulative Paymen	t To Date		Outstanding at Close o	f This Period
Date Incurred M 04 M / D 03 D / Y List All Endorsers or Guara		Date I	Y Ňoně Y	0.00	Secu % (apr)	red: /es No
1. Full Name (Last, First, M	iddle Initial)		Name of Emp!	oyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Mic	ddle Initial)		Name of Empl	oyer		
Mailing Address			Occupation			
014	01-1-	7/0 0-4-	Amount Guaranteed			
City	State	ZIP Code	Outstanding:			أسك
3. Full Name (Last, First, Mic	ddle Initial)		Name of Empl	oyer		
Mailing Address		······································	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Mi	ddle Initial)		Name of Empl	oyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This	Page (optional).			· [26.61
TOTALS This Period (last page		·		>		
Carry outstanding balance only	to LINE 3, Sci	edule D, for this line	. If no Schedule D	, carry forward	to appropriate line of	Summary.

SCHEDULE C (FEC Form 3) LOANS

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

PAGE 37 OF 119

FOR LINE NUMBER: (check only one)

13a

JANS			Detailed Summary Page	ge (check only one) 13b
ME OF COMMITTEE (In Full)			Transa	ction ID : SC/10.4234
LOAN SOURCE Full Name	(Last, First, Midd	le Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mike Assad		· · · · · · · · · · · · · · · · · · ·		General
Mailing Address 106 Minnetonka Ave.				Other (specify)
City		State ZIP Co		
Absecon		NJ 08201		
Original Amount of Loan	43.36	Cumulative Payment To	O Date Bala	ance Outstanding at Close of This Period
TERMS Date Incurred M 04 M / P 06 P / Y	ž013 Y	Date Due	None 10.00	
List All Endorsers or Guara 1. Full Name (Last, First, M		Loan Source	Name of Employer	
` <u>.</u>				
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Mi	iddle Initial)	<u></u>	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Mi	iddle Initial)		Name of Employer	<u> </u>
Mailing Address			Occupation	A
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This	Page (optional)			43.36
OTALS This Period (last page		·		
arry outstanding balance onl	v to LINE 3. Scho	edule D. for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.

SCHEDULE C (FEC I LOANS	Form 3)			for each ca	ate schedule(ategory of the Jammary Page	e (che	PAGE 38 LINE NUMBER ck only one)	
NAME OF COMMITTEE (In Full Citizens for Mike Assa	•				Transact	ion ID : SC	/10.4235	
LOAN SOURCE Full Name Mike Assad	f (Last, First, Mid	Idle Initial)	-:	[PERSONAL	. FUNDS)	Election: Prima Gener	ry	
Mailing Address 106 Minnetonka Ave.						\square	(specify) w	<u>.</u>
City		State	ZIP Code)				
Absecon		NJ	08201					
Original Amount of Loan	34.03	Cumulative Pa		ate 0.00		nce Outstar	nding at Close	of This Perio
Date Incurre M 04 ^M / D 08 ^D / Y List All Endorsers or Gual	ž013	M M / D	سلسا اس	lone Y	nterest Rate	<u></u> %	(apr)	ured: Yes No
1. Full Name (Last, First, I	Middle Initial)			Name of Emp	loyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		Desire de		
2. Full Name (Last, First, M	iddle Initial)		ı	Name of Emp	loyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		<u> </u>		
3. Full Name (Last, First, M	(liddle Initial)		1	Name of Emp	loyer			
Mailing Address			(Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		0-4-4		
4. Full Name (Last, First, N	fiddle Initial)			Name of Erop	loyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		0	- A	
SUBTOTALS This Period This	Page (optional).				, [2 - 41 - 4	34.03
TOTALS This Period (last pag	e in this line only	/)			-			
Carry outstanding balance or	nly to LINE 3, Sch	nedule D, for th	nis line. If no	Schedule D	, carry forw	ard to app	propriate line o	f Summary.

¢٥
J
ഥ
0
∞
-
-
M
0
7
-1

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s for each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transacti	ion ID : SC/10.4236
LOAN SOURCE Full Name (Last, First Mike Assad	, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Malling Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP Co	ode	
Absecon	NJ 08201		
Original Amount of Loan	Cumulative Payment To	o Date Balan	ce Outstanding at Close of This Perio
Date Incurred M 04 M / C 10 D / Y 2013 Y	Date Due	interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if a		Name of Employer	
	·		
Mailing Address		Occupation	
		Amount Guaranteed	
City Sta	te ZIP Code	Outstanding:	Ozaliwaliwa Ozaliwa Iwa Iwa Iwa Iwa Iwa Iwa Iwa Iwa Iwa I
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	4
City Sta	te ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	<u> </u>
Mailing Address		Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (option			28.71

HEDULE C (FEC F ANS	orm 3)		Use separate for each cate Detailed Sum	gory of the	FOR LINE NUMBER: (check only one)	OF 11
ME OF COMMITTEE (In Full)	l, Inc.			Transaction	ID : SC/10.4237	<u> </u>
LOAN SOURCE Full Name	(Last, First, Mic	dle Initial)	[PERSONAL F		ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City	· · ·		Code		<u></u>	
Absecon		NJ 082	201 		·	
Original Amount of Loan TERMS	40.00	Cumulative Payment	0.00			40.00
Date Incurred M 04 M / P 12 P / Y List All Endorsers or Guara	ž013	Date D	None	0.00	Secure % (apr)	X
Full Name (Last, First, M.)		D LOWIT Source	Name of Employ	er		
Mailing Address	<u> </u>		Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Mi	ddle Initiai)		Name of Employ	er		
Mailing Address		 	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Mi	ddle Initial)		Name of Employ			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:		and a surface of the	
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employ	er		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
JBTOTALS This Period This	Page (optional)					40.00
OTALS This Period (last page	in this line only	·)				

PAGE 41 OF 119

QANS	Use separate schedule(s) for each category of the Detailed Summery Page FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	Transaction ID : SC/10.4238
LOAN SOURCE Fuil Name (Last, First, Middle Initial)	[PERSONAL FUNDS] Election: 2014
Mike Assad	Primary General
Mailing Address 106 Minnetonka Ave.	Other (specify) ▼
City State ZIP C	code
Absecon NJ 0820	1
Original Amount of Loan Cumulative Payment 7 28.04	0.00 28.04
Date Incurred Date Du Mo4 ^M / D14 ^D / Y 2013 Y M M M / D D / Y	Interest Rate Secured: Y None Y 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Fuli 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:
SUBTOTALS This Period This Page (optional)	28.04
TOTALS This Period (last page in this line only)	

CHEDULE C (FEC Form CANS AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc. LOAN SOURCE Full Name (Last, Mike Assad Mailing Address 106 Minnetonka Ave. City Absecon Original Amount of Loan	:. First, Mide	dle Initial)	Use separate schedule(s) for each category of the Detailed Summary Page Transaction ID : SC/10.4239 [PERSONAL FUNDS] Election: 2014 Primary General Other (apacifs)	
LOAN SOURCE Full Name (Last, Mike Assad Mailing Address 106 Minnetonka Ave. City Absecon	First, Midd	dle Initial)	[PERSONAL FUNDS] Election: 2014	
Mike Assad Mailing Address 106 Minnetonka Ave. City Absecon		dle Initial)	Primary General	
106 Minnetonka Ave. City Absecon				
Absecon			Other (specify)	
		State ZII	P Code	
Original Amount of Loan		NJ 08	201	
	6.60		Date Balance Outstanding at Close of This 0.00 26.	-
Date Incurred MO4M / P16P / Y Ž013	Y	Date / D D /	Due Interest Rate Secured: V None 0.00 % (apr) Yes	⊠ _{No}
List All Endorsers or Guarantors		Loan Source		
1. Full Name (Last, First, Middle I	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Ir	nitial)		Name of Employer	
Mailing Address		 	Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Ir	nitial)		Name of Employer	
Mailing Address		<u> </u>	Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle In	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page ((optional)		26.	30 30
OTALS This Period (last page in this			e. If no Schedule D, carry forward to appropriate line of Sun	

N
Ŋ
Φ
0
¢¢

M
0
₽.

CHEDULE C (FEC Form 3) CANS		Use separate schedule(s) for each category of the Detailed Summæry Pæge PAGE 43 OF 1
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc.		Transaction ID : SC/10.4240
LOAN SOURCE Full Name (Last, First Mike Assad	, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City	State ZIP C	Code
Absecon	NJ 0820	21
Original Amount of Loan 27.17	Cumulative Payment	
Date Incurred MO4 / P17 / Y 2013 Y List All Endorsers or Guarantors (if an		None v 0.00 % (apr) Yes
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
City Sta		Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Laat, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This Page (option	onal)	

CHEDULE C (FEC	Form 3)		Use separate schedule		FOR LINE	PAGE NUMB			119
DANS			for each category of the Detailed Summery Pag		(check or	ily one)		\mathbf{H}	13a 13b
AME OF COMMITTEE (In F Ditizens for Mike Ass			Transac	tion i	D : SC/10.4	241			
LOAN SOURCE Full Na	me (Last, First, Middle Initial)		[PERSONAL FUNDS]		tion: 201	4			
Mike Assad					Primary General				
Mailing Address 106 Minnetonka Ave.					Other (spe	cify) 🔻		_	
City	State ZIP	Code		l					
Absecon	NJ 08	3201							
Original Amount of Loan	Cumulative Paymen	nt To Da	o.oo Bala	nce C	Outstanding	at Clos	-	This F 19.36	
TERMS Date incur	Y 2013 Y M M / D D /		Interest Rate	موسمع	% (apr	_	Secured Yes	×	S
List All Endorsers or Gu 1. Full Name (Last, First	uarantors (if any) to Loan Source		Name of Employer				•		
									•
Mailing Address		1	Decupation						
City	State ZIP Code	— c	Amount Guaranteed						
2. Full Name (Last, First,	Middle Initial)		Outstanding:	441 1444			السبوبات اد		
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation				<u>-</u>		
Walling Address		Ľ							
City	State ZIP Code		Amount Guaranteed	- <u> </u>	resident of the second	-Bassallan	أسما		
				-9			-0		
3. Full Name (Last, First,	Middle Initial)		Name of Employer						
Mailing Address		C	Occupation	•					
			Amount		Secondario Com-	مرسرو	- 		
City	State ZIP Code		Guaranteed Outstanding:	-67	desertion (1)	و المجملات			
4. Full Name (Last, First,	Middle Initial)	١	Name of Employer						
Mailing Address		-	Occupation						
City	State ZIP Code	\neg	Amount Guaranteed Outstanding:	-7>		A. A.			
	nis Page (optional)			Parada Parada				49.36	_

J	
Ľ	
Œ	
Œ	
00	
-	
-	ĺ
M	
0	
J	
_	1

CHEDULE C (FEC I DANS	Form 3)		for each ca	ate schedule(s) ategory of the mmary Page	FOR LINE NUMBER: (check only one)	OF 11
AME OF COMMITTEE (In Full Citizens for Mike Assa				Transaction	ID : SC/10.4242	
LOAN SOURCE Full Name Mike Assad	b' (Last, First, Mid	dle Initial)	[PERSONAL		ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City Absecon			P Code 8201	· · · · · · · · · · · · · · · · · · ·		
Original Amount of Loan	33.00	Cumulative Payme	ont To Date		Outstanding at Close of	This Peri
Date Incurre M 04 M / D 20 D / Y List All Endorsers or Gual	ž013	M M / D D /	Due None	0.00	Secure % (apr)	X
1. Full Name (Last, First, I	` ''		Name of Emp	loyer		
Mailing Address	······································		Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, M	liddle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	3		
3. Full Name (Last, First, M	liddle Initial)		Name of Emp	loyer		
Mailing Address	.		Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			ا
4. Full Name (Last, First, M	liddle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This	Page (optional)			> [33.00
OTALS This Period (last pag	e in this line only	')		>		
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this li	ne. If no Schedule D	, carry forward	to appropriate line of \$	Summe

L	ገ
Ш	1
U)
C)
¢)
Į.	1
~	į
M	1
C)
ς	ľ
_	-

CHEDULE C (FEC Form	3)		Use separate scho for each category Detailed Summary	of the	PAGE 46 FOR LINE NUMBER: (check only one)	OF 11
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc	C.		Tra	nsaction	ID : SC/10.4243	13b
LOAN SOURCE Full Name (Last Mike Assad Mailing Address	, First, Middle Init	ial)		Ele	ction: 2014 Primary General Other (specify)	
106 Minnetonka Ave.				_		
City	State	ZIP Cod	le			
Absecon	NJ	08201				
		ulative Payment To		Balance	Outstanding at Close of 1	his Peri
Date Incurred MO4M Date Incurred Y Z013 List All Endorsers or Guarantors 1. Full Name (Last, First, Middle	(if any) to Loan	محا لحمط	Name of Employer	Rate 0.co	Secured % (apr) Yes	X
Mailing Address		į	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:			
SUBTOTALS This Period This Page	(optional)		·····			68.19
TOTALS This Period (last page in the	is line only)					~~~
Carry outstanding balance only to L	INE 3, Schedule I	D, for this line. If r	o Schedule D, carry	forward	to appropriate line of S	umma

CHEDULE C (FEC I DANS	Form 3)	Use separate schedu for each category of Detailed Summary P	the (check only one) X 13
AME OF COMMITTEE (In Full Citizens for Mike Assa	•	Trans	action ID : SC/10.4244
LOAN SOURCE Full Name Mike Assad	5' (Last, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State Z	ZIP Code	
Absecon	NJ (08201	
Original Amount of Loan	Cumulative Paym	0.00	alance Outstanding at Close of This Pe
TERMS			
Date Incurre	d Date 2013 Y M M / D D	e Due Interest Ra	ate Secured: 00 Water Secured: (apr) Water Yes
List All Endorsers or Guar	rantors (if any) to Loan Source		
1. Full Name (Last, First, I	viiddle Initial)	Name of Employer	
Mailing Address		Occupation	
	71D O - 1	Amount Guaranteed	
City	State ZIP Code	Outstanding:	
2. Full Name (Last, First, M	liddle Initial)	Name of Employer	·
Mailing Address	<u> </u>	Occupation	
		Amount Guaranteed	
City	State ZIP Code	Outstanding:	
3. Full Name (Last, First, M	fiddle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	State ZIP Code	Outstanding:	
4. Full Name (Last, First, N	fiddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This	Page (optional)		35.71
OTALS This Period (last pag	e in this line only)	>	
Carry outstanding balance or	ly to LINE 3, Schedule D, for this I	ine. If no Schedule D, carry fo	prward to appropriate line of Summa

SCHEDULE C	(FEC	Form	3)
LOANS			

Use separate schedule(s) FOR LINE NUMBER:

PAGE

48 OF

X	13a
	13h

119

DANS	for each category of the Detailed Summary Page (check only one) X 13a 13b
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	Transaction ID : SC/10.4245
LOAN SOURCE Full Name (Last, First, Middle Initial) Mike Assad Mailing Address 106 Minnetonka Ave.	[PERSONAL FUNDS] Election: 2014 Primary General Other (specify) ▼
City State ZIP Absecon NJ 082	Code 01
Original Amount of Loan Cumulative Payment	To Date Balance Outstanding at Close of This Period 0.00 37.49
Date Incurred Date D Date D	ue Interest Rate Secured: Y Ňoně V 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
Malling 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 Amount
City State ZIP Code	Guaranteed Outstanding:
COTALS This Period This Page (optional)	

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

PAGE 49 OF 119

FOR LINE NUMBER:

X	13a
	13b

JANS			Detailed Summary Page	ge (check only one)	13b
AME OF COMMITTEE (In Fu Citizens for Mike Assa	•		Transac	ction ID : SC/10.4246	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
LOAN SOURCE Full Nam Mike Assad	ne (Last, First, Mid	dle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	<u> </u>
Mailing Address 106 Minnetonka Ave.				Other (specify)	
City		State ZIP C	ode		
Absecon		NJ 08201	<u> </u>		
Original Amount of Loan	29.49	Cumulative Payment T	0.00	ance Outstanding at Close of	
Date Incurr M 04 M / P 26 P / N List All Endorsers or Gua	Ž013 Y	Date Due	None O.O.	0 % (apr)	ed:
1. Full Name (Last, First,		- Loan Godice	Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Guaranteed		
2. Full Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Guaranteed		
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:		
SUBTOTALS This Period Thi					29.49
Cerry outstanding balance of	nly to LINE 3. Sch	edule D. for this line. I	f no Schedule D. carry for	ward to appropriate line of	Summary

CHEDULE C (FEC I OANS	Form 3)			Use separate schedu for each category of Detailed Summæry P	of the (check only one) X 13
IAME OF COMMITTEE (In Full Citizens for Mike Assa	-	-		Trans	saction ID : SC/10.4247
LOAN SOURCE Full Name Mike Assad	ś (Last, First, Mid	Idle Initial)	-	[PERSONAL FUNDS]	Primary General
Mailing Address 106 Minnetonka Ave.					Other (specify)
City		State	ZIP Cod	e	
Absecon		NJ	08201		
Original Amount of Loan	78.38	Cumulative P	ayment To I	Date Ba	Balance Outstanding at Close of This Per
TERMS Date Incurre	Ž013 Y			Interest Re None Co.	Rate Secured:
List All Endorsers or Gua		Loan Source	9		
1. Full Name (Last, First, I	viiddle Initial)			Name of Employer	
Mailing Address				Occupation	
		710 0 4		Amount Guaranteed	
City	State	ZIP Code		Outstanding:	
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	
3. Full Name (Last, First, N	liddle Initial)			Name of Employer	-
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, N	fiddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	<u></u>	Amount Guaranteed	
				Outstanding:	
SUBTOTALS This Period This TOTALS This Period (last pag					78.38
Carry outstanding balance or	lly to LINE 3, Sch	nedule D, for th	his line. If n	no Schedule D, carry fo	orward to appropriate line of Summar

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summæry Page PAGE 51 OF 1 FOR LINE NUMBER: (check only one) X 13
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4303
LOAN SOURCE Full Name (Last, First, M Mike Assad	liddle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City Absecon		201
Original Amount of Loan	Cumulative Paymer	Date Balance Outstanding at Close of This Period 0.00 30.00
Date Incurred Mo4 ^M Date Incurred Date Incurred	Date / D D /	Due Interest Rate Secured: Y None Y 0.00 % (apr) Yes
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	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:
UBTOTALS This Period This Page (optional	·	

_	4
U)
U)
Œ)
¢)
_	4
(1
Ν	1
Œ)
ς	ľ
_	

CHEDULE C (FEC OANS	Form 3)			Use separate for each cate Detailed Sum		FOR LINE NUMBER: (check only one)	OF 119
IAME OF COMMITTEE (In Ful Citizens for Mike Assa					Transaction	ID : SC/10.4276	
LOAN SOURCE Full Nam Mike Assad	é (Last, First, Midd	lle Initial)		[PERSONAL I		ction: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.						Other (specify) ▼	
City		State	ZIP Code)		 	
Absecon		NJ	08201				
Original Amount of Loan	40.00	Cumulative Pay	ment To D		Balance	Outstanding at Close of	This Perio
Date Incurre	ž01š ř rantors (if any) to	M / D D		lone Y	0.00	Secur % (apr)	red: /es N
1. Full Name (Last, First,	Middle Initial)			Name of Emplo	yer		
Mailing Address				Occupation Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last, First, M	/liddle Initial)		1	Name of Emplo	yer		
Mailing Address		·		Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (Last, First, M	fiddle Initial)			Name of Emplo	yer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	and and and		
4. Full Name (Last, First, N	Aiddle Initial)		1	Name of Emplo	yer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period This	Page (optional)						40.00
FOTALS This Period (last page	ge in this line only)						-498
Carry outstanding balance o	nly to LINE 3, Scho	edule D, for this	line. If no	o Schedule D,	carry forward	to appropriate line of	Summar

Ċ	`	J
Ĺ	1)
ĺ	1)
(Ξ)
(X)
•	_	ł
•	u.	ł
ř	1	Ì
¢	•)
¢	7	r
۳	_	1

SCHEDULE C (FEC Foi LOANS	rm 3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 13a 13b
NAME OF COMMITTEE (In Full) Citizens for Mike Assad,	Inc.	Transaction	ID : SC/10.4277
LOAN SOURCE Full Name (L. Mike Assad	ast, First, Middle Initial)	[ection: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City Absecon	State ZIP 0	Code 01	
Original Amount of Loan	Cumulative Payment 5.00		Outstanding at Close of This Period
List All Endorsers or Guarant		Y Ňoně Y 0.00	Secured: % (apr) Yes No
Fuli Name (Last, First, Mide Mailing Address	die initial)	Name of Employer Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
2. Fuil Name (Last, First, Midd	le Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Midd	le Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Midd	le Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Pa	ge (optional)		0.00
	o LINE 3, Schedule D, for this line.	Bases Ones,	t to appropriate line of Summer

SCHEDULE C (FEC Form 3) LO

Use separate schedule(s) FOR LINE NUMBER:

PAGE 54

X	13a
	13b

OF

119

ANS				for each car Detailed Sur	tegory of the mæy Page		×	13 13
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc	<u> </u>				Transacti	on ID : SC/10.4278		ت
LOAN SOURCE Full Name (Last, Mike Assad		ddle Initial)		[PERSONAL	FUNDSJ	Election: 2014 Primary		
Mailing Address 106 Minnetonka Ave.						General Other (specify) ▼		
City		State	ZIP Code					_
Absecon		NJ	08201					
Original Amount of Loan		Cumulative Pa	•	ate	Balan	ce Outstanding at Close of	of This	P
	0.00			10.00			0.00	0
Date Incurred Date Incurred Date Incurred Date Incurred		M M / D		In None	terest Rate	Secu % (apr)	_	X
List All Endorsers or Guarantors		o Loan Source						_
1. Full Name (Last, First, Middle	Initial)			Name of Emplo	oyer			
Mailing Address				Occupation				_
				Amount			~~	_
City	State	ZIP Code		Guaranteed Outstanding:		9		l
2. Full Name (Last, First, Middle II	nitial)			Name of Emplo	oyer	4.4.4		_
Mailing Address	<u> </u>			Occupation				
				Amount	شرطه			
City	State	ZIP Code		Guaranteed Outstanding:		6)	أحد	
3. Full Name (Last, First, Middle I	nitial)	· · · · · · · · · · · · · · · · · · ·		Name of Empl	oyer			
Mailing Address				Occupation	<u></u>			_
				Amount				_
City	State	ZIP Code		Guaranteed Outstanding:	L		أحب	ļ
4. Full Name (Last, First, Middle I	nitial)			Name of Empl	oyer			_
Mailing Address				Occupation				_
City	State	ZIP Code		Amount Guaranteed	-		77	_
	<u> </u>	0000		Outstanding:		0_1_1_0_0		İ
UBTOTALS This Period This Page	(optional).				<u> </u>		0.00	0
OTALS This Period (last page in the	is line only	y)		•••••	>		سنكاسيط	۔

ς	ľ
Œ)
Œ)
Œ)
¢	>
_	ŧ
(Freeze	ł
M	Ì
Œ)
4	ľ
_	ł

CHEDINE C (EEC Form 3)				PAGE 55	OF 119
CHEDULE C (FEC Form 3) DANS		for each ca	te schedule(s) tegory of the mæry Page	FOR LINE NUMBER: (check only one)	X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transaction ID : SC/10.4280			
LOAN SOURCE Full Name (Last, First, M. Mike Assad	liddle Initial)	[PERSONAL	FUNDSJ Ele	ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.				Other (specify)	
City	State	ZIP Code			
Absecon	NJ	08201			
Original Amount of Loan	Cumulative Pay	ment To Date	Balance	Outstanding at Close o	f This Perio
Date incurred Date incurred Date incurred Date incurred Date incurred Date incurred Date incurred	M M / D D	/ None	0.00	Secu % (apr)	red: Yes N
Full Name (Last, First, Middle Initial)		Name of Emp	oyer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Emp	oyer		
Mailing Address		Occupation			
City State	ZiP Code	Amount Guaranteed Outstanding:	n e		
3. Full Name (Last, First, Middle Initial)		Name of Emp	loyer	·	
Mailing Address		Occupation	· - · · · · · · · · · · · · · · · · · ·		
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)		· [35.61
FOTALS This Period (last page in this line or	nly)		+		
Carry outstanding balance only to LINE 3, S	chedule D, for this	line. If no Schedule D	, carry forward	to appropriate line of	Summar

L	1
Œ)
Œ)
Œ)
Ò.	>
-	į
	1
М	Ì
Œ)
S	ľ
_	1

CHEDULE C (FEC OANS	Form 3)		for ea	separate schedule(s ach category of the led Summary Page	(check only one) X 13a
IAME OF COMMITTEE (In Fu Citizens for Mike Assa	•			Transacti	on ID : SC/10.4281
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Mid	dle Initial)	(PERS	ONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼
City		State	ZIP Code		
Absecon		NJ	08201		
Original Amount of Loan	35.65			0.00	ce Outstanding at Close of This Perio
Date Incurred M 05 ^M / D 05 ^D / Y List All Endorsers or Gua	ž013 Y	A B M / D D	te Due	Interest Rate	Secured: % (apr) Yes No
Full Name (Last, First,	• • • • • • • • • • • • • • • • • • • •	Loan Source	Name o	f Employer	•
Mailing Address			Occupat		
City	State	ZIP Code	Amount Guarante Outstand	eed	
2. Full Name (Last, First, I	Middle Initial)		Name o	f Employer	
Mailing Addross		<u> </u>	Occupat	tion	
City	State	ZIP Code	Amount Guarant Outstan	eed	
3. Full Name (Last, First, I	Middle Initial)		Name o	f Employer	
Mailing Address			Occupat	tion	
City	State	ZIP Code	Amount Guarant Outstand	eed	
4. Full Name (Last, First, I	Middle Initial)	_ ·	Name o	f Employer	
Mailing Address			Occupa	tion	
City	State	ZIP Code	Amount Guarant Outstan	eed	
SUBTOTALS This Period Thi	s Page (optional)			····· >	35.65
TOTALS This Period (last page	ge in this line only)			
Carry outstanding balance o	nly to LINE 3, Sch	edule D, for this	line. If no Sched	lule D, carry forwa	ard to appropriate line of Summary

Œ)
Œ	١
u)
C)
¢.)
_	Ì
6 444	١
М	١
Œ)
9	r
_	4

HEDULE C (FEC F ANS	orm 3)	for each ca	te schedule(s) tegory of the mmæy Page	FOR LINE NUMBER: (check only one)	OF 1
ME OF COMMITTEE (In Full)	I, Inc.		Transaction	ID : SC/10.4282	- <u></u>
LOAN SOURCE Full Name Mike Assad	(Last, First, Middle Initial)	[PERSONAL		ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.				Other (specify) ▼	
City	State Zi	IP Code			-
Absecon	NJ 0	8201			
Original Amount of Loan	Cumulative Payme	ent To Date		Outstanding at Close of	
Date Incurred	Date 2013 Y M M / D D /	Due Noné Y	nterest Rate 0.00	% (apr)	ed:
1. Full Name (Last, First, M		Name of Emp	oyer		_
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Mi	ddle Initial)	Name of Emp	oyer		
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Mi	ddle Initial)	Name of Emp	oyer		
Mailing Address	-	Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Mi	ddle Initial)	Name of Emp	oyer		
Mailing Address		Occupation	<u>.</u> .		
City	State ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This	Page (optional)				33.00
OTALS This Period (last page	in this line only)				

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page			PAGE 58 FOR LINE NUMBER: (check only one)	OF X		
ME OF COMMITTEE	•				Transac	tion II	D : SC/10.4283	<u> </u>	1:55
LOAN SOURCE Full Mike Assad	ll'Name (Last, First, Mi	ddle Initial)		[PERSONAL	FUNDS]	X	tion: 2014 Primary General		
Mailing Address 106 Minnetonka Ave.							Other (specify) ▼		
City		State	ZIP Code)		•		. •	
Absecon		NJ	08201						
M ₀₅ M / P ₀₈ P	Incurred / Y Ž013 Y or Guarantors (if any)	M M / D	سفسيا لس	0.00	nterest Rate	مهبس	Secur		×
1. Full Name (Last,				Name of Empl	oyer				
Mailing Address			•	Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:					
2. Full Name (Last,	First, Middle Initial)		1	Name of Empl	oyer.				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding:		-9			
3. Full Name (Last,	First, Middle Initial)		1	Name of Empl	oyer		· · · · · · · · · · · · · · · · · · ·		
Mailing Address			- 	Occupation					

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D), can	ry forward to appropriate line of Summary.
TOTALS This Period (last page in this line only)	•	
SUBTOTALS This Period This Page (optional)	<u> </u>	42.52

ZIP Code

ZIP Code

Stare

State

Amount Guaranteed

Outstanding:

Occupation

Guaranteed

Outstanding:

Amount

Name of Employer

City

City

Mailing Address

4. Full Name (Last, First, Middle Initial)

¢)
Œ)
C)
Œ)
QC	
-	ı
1	į
M.	Ì
Œ)
4	r
_	Į

CHEDULE C (FEC Form	n 3)		for each o	rate schedule(s category of the Summary Page	
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Ir	nc.			Transaction	on ID : SC/10.4284
LOAN SOURCE Full Name (Las Mike Assad	st, First, Mic	idle initial)	[PERSONA	_ , _ , _ ,	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼
City		State	ZIP Code		_
Absecon		NJ	08201		
Original Amount of Loan TERMS Date Incurred MO5M / DO9D / Y ZO1	15.00	Cumulative Paym Dat			O.00 Secured:
	L				% (apr) Yes N
List All Endorsers or Guaranto 1. Full Name (Last, First, Middl		o Loan Source	Name of Em	ployer	
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle	Initial)	,	Name of Em	ployer	
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed		
City	State	ZIF COUP	Outstanding:		
3. Full Name (Last, First, Middle	Initial)	1	Name of Em	ployer	
Mailing Address	<u> </u>	1.W.2-1.	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		Description (Description (Description)
4. Full Name (Last, First, Middle	Initial)		Name of Em	ployer.	
Mailing Address	· <u>·</u>		Occupation		· .
City	State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Pag	e (optional).			•	0.00
TOTALS This Period (last page in	this line only	у)			
Carry outstanding balance only to	LINE 3, Sci	nedule D, for this	line. If no Schedule	D, carry forwa	ard to appropriate line of Summar

¢	J)
(ſ)
ĺ	1)
(:	Ì
¢	X	>
P	1000	ı
•	_	1
ì	ſ	ì
Ć	Ξ)
Ç	7	r
•	-	ł

SCHEDULE C (FEC F OANS	Form 3)		for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: (check only one)	
NAME OF COMMITTEE (In Full Citizens for Mike Assa	-			Transaction	ID : SC/10.4285	
LOAN SOURCE Full Name Mike Assad	f (Last, First, Mic	Idle Initial)	[PERSONA	AL FUNDS] Ele	ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City		State	ZIP Code 08201			
Original Amount of Loan	46.50		yment To Date	0	Outstanding at Close o	46.50
TERMS Date Incurred M05 ^M / D12 ^D / Y	ž013	M M / D D	Date Due	Interest Rate	% (apr)	red: Yes N
1. Full Name (Last, First, N		o Loan Source	Name of Em	ployer		
Mailing Address		<u> </u>	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding			
2. Full Name (Last, First, M	liddle Initial)		Name of Em	nployer		
Mailing Address		· -	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding			
3. Full Name (Last, First, M	liddle Initial)		Name of En	nployer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding			
4. Full Name (Last, First, M	liddle Initial)		Name of En	pployer	· · · · · · · · · · · · · · · · · · ·	
Mailing Address			Occupation		· · · · · · · · · · · · · · · · · · ·	
City	State	ZIP Code	Amount Guaranteed Outstanding			
SUBTOTALS This Period This	Page (optional).			. •		46.50
TOTALS This Period (last pag	e in this line only	/)				
Carry outstanding balance on	ly to LINE 3, Sci	nedule D, for thi	s îine. If no Schedule	D, carry forward	I to appropriate line of	Summar

HEDULE C (FEC Form ANS	3)	Use separate schedu for each category of Detailed Summary Pa	the (check only one) X 13s
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc		Transa	action ID : SC/10.4286
LOAN SOURCE Full Name (Last, Mike Assad	First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City	State	ZIP Code	
Absecon	NJ	08201	
Original Amount of Loan	Cumulative Payn	nent To Date Ba	lance Outstanding at Close of This Per
Date Incurred Mo5 ^M / P13 ^D / Y 2013 List All Endowers or Cusyntors	M M / 0 0	te Due Interest Ra	
List All Endorsers or Guarantors 1. Full Name (Last, First, Middle I		Name of Employer	
		i	
Mailing Address		Occupation	
Mailing Address	State ZIP Code	Occupation Amount Guaranteed Outstanding:	
-		Amount Guaranteed	
City		Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle In		Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
City 2. Full Name (Last, First, Middle In Mailing Address	State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
City 2. Full Name (Last, First, Middle In Mailing Address City	State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle In Mailing Address City 3. Full Name (Last, First, Middle In Mid	State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
City 2. Full Name (Last, First, Middle In Mailing Address City 3. Full Name (Last, First, Middle In Mailing Address	State ZIP Code nitial) State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle In Mailing Address City 3. Full Name (Last, First, Middle In Mailing Address City	State ZIP Code nitial) State ZIP Code	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	

TOTALS This Period (last page in this line only).....

SCHEDULE C	(FEC	Form	3)
LOANS			

Use separate schedule(s) FOR LINE NUMBER:

PAGE 62

X	13a
	13b

OF

119

DANS					category of the Summery Pag		(check only one	∍)	13a 13b
AME OF COMMITTEE (In Full)			. ···	· · · · · · · · · · · · · · · · · · ·	Transac	tion ID	: SC/10.4287		1 1:5
itizens for Mike Assad,	Inc.								
LOAN SOURCE Full Name (Last, First, Mid	dle Initial)		[PERSON	AL FUNDS]		ion: 2014 Primary General		
Mailing Address 106 Minnetonka Ave.							Other (specify)	7	
City		State	ZIP Code	•		L			
Absecon		NJ	08201						
Original Amount of Loan			Payment To D				utstanding at Cl	ose of	This Period
7	35.93			0.0	- 8 8 '		41-41-41		35.93
TERMS Date Incurred			Date Due		interest Rate	9		Secure	ed:
M ₀₅ M / P ₁₅ P / Y	2013 Y	M M / D	D / Y	Vone	0.00		% (apr)		es No
List All Endorsers or Guarar	ntors (if any) to	Loan Source	e						
1. Full Name (Last, First, Mic	ddle Initial)			Name of En	nployer				
Mailing Address	-			Occupation					<u></u>
City	State	ZIP Code		Amount Guaranteed Outstanding		-0			
2. Full Name (Last, First, Mid	dle Initial)			Name of En	cployer				
Mailing Address				Occupation					****
City	State	ZIP Code		Amount Guaranteed Outstanding	1 -	و اس			
3. Full Name (Last, First, Mid	dle Initial)			Name of En	nployer				
Mailing Address	· ·			Occupation		-			
City	State	ZIP Code		Amount Guaranteed Outstanding		a Daniel		- A	4
4. Full Name (Last, First, Mid	dle Initial)			Name of En	ployer				
Mailing Address				Occupation					
City	State	ZIP Code		Amount Guaranteed Outstanding		<u> </u>		-0	
SUBTOTALS This Period This P									35.93
Carry outstanding balance only	to LINE 3. Sch	edule D. for t	this line. If n	o Schedule	D. cerry for	ward to	appropriate li	ne of	Summary.

CHEDULE C (FEC Form 3) DANS		Use separate schedule(for each category of the Detailed Summary Page	e (check only one)
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transact	ion ID : SC/10.4288
LOAN SOURCE Full Name (Last, First, Mike Assad	Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP C	code	
Absecon	NJ 0920	1	
Original Amount of Loan	Cumulative Payment 1	To Date Balar	ace Outstanding at Close of This F
Date Incurred M05 ^M / P17 ^P / Y 2013 Y	Date Du	e interest Rate	Secured: % (apr) Yes
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	W	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:	

TOTALS This Period (last page in this line only).....

SCHEDULE C	(FEC	Form	3)
LOANS			

Use separate schedule(s) FOR LINE NUMBER:

×	13a
	13b

PAGE 64 OF 119

DANS		for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4289
LOAN SOURCE Full Name (Last, First, Middle Mike Assad Malling Address 106 Minnetonka Ave.	Initial)	[PERSONAL FUNDS]	Election: 2014 ☐ Primary General Other (specify) ▼
City Sta Absecon N	te ZIP Code	•	
Original Amount of Loan Co	umulative Payment To D		ance Outstanding at Close of This Period
Date Incurred Mo5M Date Incurred Mo5M Date Incurred Mo5M Date Incurred Mo5M Date Incurred Mo5M Date Incurred Mo5M Date Incurred Mo5M Date Incurred		Interest Rate	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State Z	IP Code	Amount Guarenteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	L	Occupation	
City State 2	IP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State Z	IP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State Z	IP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional) FOTALS This Period (last page in this line only)			30.00
Carry outstanding balance only to LINE 3. Schedu	le D for this line if no	schedule D. carry for	vard to appropriate line of Summany

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s) FOR LINE NUMBER:

X	13a
П	13b

PAGE 65 OF 119

DANS				ategory of the ummary Page	(check only one)	×	13a 13b
AME OF COMMITTEE (In Ful Citizens for Mike Assa	•			Transactio	n ID : SC/10.4290		
LOAN SOURCE Full Nam Mike Assad	é (Last, First, Mic	dle Initial)	[PERSONAL	_ , _ ,	Primary General		
Mailing Address 106 Minnetonka Ave.					Other (specify)		
City		State ZII	P Code		· · ·		
Absecon		NJ 08	3201		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Original Amount of Loan	28.62	Cumulative Payme			e Outstanding at Close of	7 This 28.62	-
Date Incurre	ž013 °	Date	Due Y Ňone	O.00	Secul	_	X No
List All Endorsers or Gua 1. Full Name (Last, First,		Loan Source	Name of Emp	oloyer			
Mailing Address			Occupation				
			Amount			<u></u>	
City	State	ZIP Code	Guaranteed Outstanding:	مستستس			
2. Full Name (Last, First, N	Middle Initial)		Name of Emp	oloyer			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:				
3. Full Name (Last, First, N	Aiddle Initial)	· · · · · · · ·	Name of Emp	ployer			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, N	/liddle Initial)		Name of Emp	ployer		-	
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Occupation	-	· · · · · · · · · · · · · · · · · · ·		
City	State	ZIP Code	Amount Guaranteed Outstanding:			-	
SUBTOTALS This Period This						28.6	2

HEDULE C (FEC	Form 3)					PAGE 66	OF	_
ANS	, i dilli d			Use separate schedule(s) for each category of the Detailed Summary Page				1
ME OF COMMITTEE (In little As					Transaction	ID : SC/10.4291		_
LOAN SOURCE Full No Mike Assad	amé' (Last, First, Mic	Idle Initial)		[PERSONAL F	FUNDS] Ele	ection: 2014 Primary		_
Mailing Address 106 Minnetonka Ave.						General Other (specify) ▼		
City		State	ZIP Code	9				_
Absecon		NJ	08201					
Original Amount of Loa	30.00	Cumulative P		0.00		Outstanding at Close of	This	۰,
Date Incl. M05 ^M P22 ^D /	^y 2013 ^y	M M / D		Int None Y	erest Rate 0.00	Secur	ed: es	×
List All Endorsers or G 1. Full Name (Last, Firs		o Loan Source		Name of Emplo	yer	····		_
Mailing Address				Occupation				_
			-	Amount				_
City	State	ZIP Code		Guaranteed Outstanding:				
2. Full Name (Last, First	, Middle Initial)			Name of Emplo	yer			
Mailing Address				Occupation				_
City	State	ZIP Code		Amount Guaranteed Outstanding:				_
3. Full Name (Last, First	t, Middle Initial)			Name of Emplo	yer			-
Mailing Address				Occupation	- <u>-</u>			_

Outstanding:

Occupation

Guaranteed

Outstanding:

Amount

Name of Employer

4. Full Name (Last, First, Middle Initial)

State

ZIP Code

Mailing Address

City

ഗ
~
ω
0
∞
-
{
M
0
ZI.
-

CHEDULE C (FEC I	Form 3)		for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: (check only one)	OF 119
NAME OF COMMITTEE (In Full Citizens for Mike Assa	="				L a ID : SC/10.4292	· 13b
LOAN SOURCE Full Name Mike Assad	(Last, First, Mid	dle Initial)	[PERSONAL	FUNDS] EI	ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City		State ZIP	Code			
Original Amount of Loan	34.86	Cumulative Payment			Outstanding at Close of	
Date Incurred M 05 M / P 25 D / Y List All Endorsers or Guar	Ž013 Y	Date D		nterest Rate	% (apr)	ed: es No
Full Name (Last, First, Fig. 1)	` • •		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	Z!P Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, M	iddle Initial)		Name of Emp	lcyer		
Mailing Address		-	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			yes ton.
3. Full Name (Last, First, N	iddle Initial)		Name of Emp	loyer		
Mailing Address		<u> </u>	Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:		Annal (1)	
4. Full Name (Last, First, M	liddle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This	Page (optional)			> [34.86
TOTALS This Period (last pag	e in this line only)		F		
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this line	. If no Schedule D	, carry forward	to appropriate line of	Summar

SCHEDULE C (FEC Form 3)

PAGE 68 OF 119

OANS	for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) X 13a 13b
IAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	Transaction ID : SC/10.4293
LOAN SOURCE Full Name (Last, First, Middle Initial) Mike Assad	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.	Other (specify) ▼
City State ZIP Code	
Absecon NJ 08201 .	
Original Amount of Loan Cumulative Payment To Da 37.51	
	Interest Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
7. Tuli Hullio (220), Thoi, Middle Hillay	
	Occupation
City State ZIP Code	Amount Guaranteed Dutstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Dutstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Dutstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)	

¢
·
Ø
0
¢
-4
ہے ،
M
0
J
-

Absecon	State ZIP C NJ 0820 Cumulative Payment T Date Due	1 To Date Balance Outstanding at Close of This	_
Mailing Address 106 Minnetonka Ave. City S Absecon Original Amount of Loan TERMS Date Incurred MO5M / P31P / Y 2013 Y List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	State ZIP C NJ 0820 Cumulative Payment T	Primary General Other (specify) ▼ Code 1 To Date Balance Outstanding at Close of This	_
City S Absecon Original Amount of Loan TERMS Date Incurred MO5 ^M / P31 ^D / Y 2013 Y List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	NJ 0820	Code 1 To Date Balance Outstanding at Close of This	_
Original Amount of Loan TERMS Date Incurred MO5M P31P V 2013 M List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	NJ 0820	1 To Date Balance Outstanding at Close of This	_
Original Amount of Loan 30.01 TERMS Date Incurred M05M / P31P / Y 2013 Y List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Cumulative Payment 1	To Date Balance Outstanding at Close of This	_
Date Incurred MO5M Date Incurred MO5M Date Incurred MO5M Date Incurred MO5M Date Incurred MO5M Table Parameters of Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)			_
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Date Du		
1. Full Name (Last, First, Middle Initial)		V V V V	⊠ _{No}
Mailing Address	Loan Source	Name of Employer	-
		Occupation	
City State	ZIP Ccde	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:]
SUBTOTALS This Period This Page (optional)			24
TOTALS This Period (last page in this line only). Carry outstanding balance only to LINE 3, Sche		30.	UT

ഗ
١.
Ø
0
0
-
M
o
ব
ä

CHEDULE C (FEC	Form 3)		for each ca	te schedule(s) tegory of the mmany Page	PAGE 70 FOR LINE NUMBER: (check only one)	
AME OF COMMITTEE (In Fu Ditizens for Mike Assa	•			Transaction	ID : SC/10.4295	_1_1.
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Midd	die Initial)	[PERSONAL		ection: 2014 Primary General	l (<u></u>
Mailing Address 106 Minnetonka Ave.					Other (specify)	
City		State ZIP	Code			
Absecon		NJ 082	201			
Original Amount of Loan	30.00	Cumulative Payment	0.00		Outstanding at Close o	30.00
Date Incurred Moe / Dog Dog Dog Dog Dog Dog Dog Dog Dog Dog	Ž013 Y		oue I	0.00	Secul	red: ⁄es
1. Full Name (Last, First,			Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, I	Middle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Arnount Guaranteed Outstanding:			
3. Full Name (Last, First, I	Middle Initial)		Name of Emp	loyer		
Mailing Address			Occupation		- ,	
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, I	Middle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			л
UBTOTALS This Period Thi	s Page (optional)			>		30.00
OTALS This Period (last pa	ge in this line only)	•••••		>		
Carry outstanding balance o	nly to LINE 3, Scho	edule D, for this line	. If no Schedule D	, carry forward	to appropriate line of	Summe

SCHEDULE C (FEC Form 3) LO

Use separate schedule(s)

PAGE 71 OF 119 FOR LINE NUMBER:

X	13a
	13b

DANS			ategory of the unamary Page	(check only one)	X 13a
AME OF COMMITTEE (In Full) Ditizens for Mike Assad, Inc.		•	Transactio	on ID : SC/10.4296	
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	[PERSONAL		Election: 2014 Primary	
Mailing Address 106 Minnetonka Ave.				General Other (specify) ▼	
City		Code			
Absecon	NJ 082	01			
Original Amount of Loan 32.54		0.00		e Outstanding at Close o	32.54
TERMS Date Incurred MO6 / PO4 P / Y Z013 Y	Date D		nterest Rate	% (apr)	
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Emp	loyer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	·	Name of Emp	ioyer		
Mailing Address		Occupation	··········	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
City State	ZIP Code	Amount Guaranteed Outstanding:			CONTRACTOR OF THE PROPERTY OF
3. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation	- 		
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Emp	loyer		
Mailing Address		Occupation		·	
City State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional					32.54
OTALS This Period (last page in this line or Carry outstanding balance only to LINE 3, S			Barra Assa		

SCHEDULE C (FEC LOANS	Form 3)		for each c	ate schedule(s) ategory of the ummæry Page	FOR LINE NUMBER: (check only one)	OF 119
NAME OF COMMITTEE (In Fu	•		1	Transaction	ID : SC/10.4297	1 1 2 2 2
LOAN SOURCE Full Nar Mike Assad	[PERSONAL	[PERSONAL FUNDS] Election: 2014 Primary General				
Mailing Address 106 Minnetonka Ave.			,		Other (specify) ▼	
City		State Z	IP Code			
Absecon		NJ (08201	_		
Original Amount of Loan	19.00	Cumulative Paym			Outstanding at Close of	This Perio
Date Incur M 06 / P 04 P / List All Endorsers or Gu	ž013 v arantors (if any) to	M M / D D	Due / Name of Emp	0.00	Secure % (apr)	\boxtimes
Full Name (Last, First, Middle Initial)			Name of Emp	Traile of Employer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First,	Middle Initial)		Name of Emp	oloyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First,	Name of Emp	Name of Employer				
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:		0	
4. Full Name (Last, First,	Name of Emp	Name of Employer				
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period Th	is Page (optional).			, [0.00
TOTALS This Period (last pa				الساسا		
Carry outstanding balance	only to LINE 3. Sci	nedule D, for this I	ine. If no Schedule [), carry forward	to appropriate line of S	ummary

N
Ø
Ø
Θ
¢

-
M
0
ব

SCHEDULE C (FEC LOANS	Form 3)		for each c	ate schedule(s) ategory of the ummary Page	1 1 1 1 1	13a 13b
NAME OF COMMITTEE (In Fu Citizens for Mike Ass	•		· · ·	Transaction	ID : SC/10.4298	
LOAN SOURCE Full Nar Mike Assad	ne' (Last, First, Mid	dle Initial)	[PERSONAL	L FUNDS] Ele	ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City		State ZI	P Code			
Absecon		NJ 0	8201			
Original Amount of Loan	25.00	Cumulative Payme	0.00		Outstanding at Close of This I))
TERMS Date Incum M 06 ^M / P 05 ^D / List All Endorsers or Gu	žo13 Y	Date	Due,	Interest Rate	Secured:	< N
1. Full Name (Last, First,			Name of Emp	oloyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Emp	oloyer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First,	Middle Initial)		Name of Emp	oloyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First,	Middle Initial)	·	Name of Emp	oloyer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period Th	is Page (optional)			>	25.00)
TOTALS This Period (last pa	ige in this line only	·)		•		-C
Carry outstanding balance	only to LINE 3, Sch	edule D, for this lir	ne. If no Schedule D	D, carry forward	I to appropriate line of Summ	

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transactio	on ID : SC/10.4299
LOAN SOURCE Full Name (Last, First, M Mike Assad Mailing Address 106 Minnetonka Ave.	iddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify)
City	State ZIP NJ 082	Code 01	
Original Amount of Loan	Cumulative Payment		ce Outstanding at Close of This Period
Date Incurred MO6M Date Incurred Date Incurred Date Incurred	Date D	ue Interest Rate Y Ňoně Y 0.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any)	to Loan Scurce		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Ccde	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	/ M

Date Inc	curred Date	Due Interest Hate Secured:
M 06M / D 06D /	Y 2013 Y M M / D D /	v None v 0.00 % (apr) ☐ Yes No
List All Endorsers or (Guarantors (if any) to Loan Scurce	
1. Full Name (Last, Fir	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, Firs	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed
		Outstanding:
3. Full Name (Last, Firs	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, Fire	st, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount ***
City	State ZIP Code	Guaranteed
·		Outstanding:
UIRTOTALS This Pariod	This Page (ontional)	25.00
UBTOTALS This Period This Page (optional)		
Describe and Share the and Sha		
	e only to LINE 3, Schedule D, for this lir	ne. If no Schedule D, carry forward to appropriate line of Summary.
N018		FEC Schedule C (Form 3) (Revised 02/2003

CHEDULE C (FEC Form 3) DANS		Use separate schedule(sfor each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transact	Ion ID : SC/10.4300
LOAN SOURCE Full Name (Last, First, Mid Mike Assad	die Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City Absecon	State ZIP Cod NJ 08201	de	
Original Amount of Loan 25.00	Cumulative Payment To	Date Balan	ce Outstanding at Close of This Perio
Date Incurred Mo6M / D07D / Y 2013 Y List All Endorsers or Guarantors (if any) to	Date Due	Interest Rate	Secured: (apr)
Full Name (Last, First, Middle Initial)	174	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employe:	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	0
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	0
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			25.00
TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch			

SCHEDULE &	(FEC	Form	3)
LOANS		•	

Use separate schedule(s) FOR LINE NUMBER:

X	13a
	13b

PAGE 76 OF 119

	Detailed	Summary Page	(check only one)	×	13a 13b
	<u> </u>	Transactio	on ID : SC/10.4301	•	
dle initial)	[PERSON.		Primary General		
		. [Other (specify)		
			_		
NJ 08	3201 				
•			e Outstanding at Close o	25.00	
Date	Due Y None	Interest Rate	% (apr)	2	X _{No}
Loan Source				100	
	Name of En	nployer			
	Occupation				
ZIP Code	Amount Guaranteed Outstanding				
- :	Name of En	nployer			
	Occupation				
ZIP Code					
	Name of En	nployer			
	Occupation				
ZIP Code		R			
	Name of En	pployer			
	Occupation				
ZIP Code	Amount Guaranteed Outstanding				
·		isonatus		25.0	0
	Cumulative Payment Date Loan Source ZIP Code ZIP Code	State ZIP Code NJ 08201 Cumulative Payment To Date Date Due A M / D D / Y None Y Loan Source Name of Er Occupation Amount Guaranteed Outstanding Name of Er Occupation Amount Guaranteed Outstanding Name of Er Occupation Amount Guaranteed Outstanding Name of Er Occupation Amount Guaranteed Outstanding Name of Er Occupation Amount Guaranteed Outstanding Name of Er Occupation Amount Guaranteed Outstanding Name of Er	State ZIP Code NJ 08201 Cumulative Payment To Date Balance Date Due Interest Rate Date Due Interest Rate M D D None Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer	State ZIP Code NJ 08201 Cumulative Payment To Date Balance Outstanding at Close of the Code of the C	Cocupation Co

SCHEDULE C (FEC Form 3) LC

Use separate schedule(s) for each category of the

PAGE 77 OF 119

FOR LINE NUMBER:

_	
X	13a
	10h

DANS		Detailed Summary Pag	La (Chack Only Only)	13a 13b
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4302	
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	[PERSONAL FUNDS]	Election: 2014	
Mike Assad			Primary General	
Mailing Address 106 Minnetonka Ave.		•	Other (specify)	
City	State ZIP C	Code		
Absecon	NJ 0820	1		
Original Amount of Loan	Cumulative Payment		ance Outstanding at Close of This F	'erio
25.00		0.00	25.00	
TERMS Date Incurred M 06 / P 09 / Y 2013 Y	Date Du	None 0.00		No
List All Endorsers or Guarantors (if any) t	to Loan Source			
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:	<u> </u>	
SUBTOTALS This Period This Page (optional). FOTALS This Period (last page in this line onl			25.00	

PAGE 78 OF 119 SCHEDULE C (FEC Form 3) Use separate schedule(s) FOR LINE NUMBER: for each category of the X 13a **LOANS** (check only one) Detailed Summary Page 13b Transaction ID: SC/10.4249 NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc. LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] **Primary** Mike Assad General Mailing Address Other (specify) 106 Minnetonka Ave. City ZIP Code State Absecon NJ 08201 Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 0.00 25.00 25.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 "06^M 2013 None % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State **ZIP Code** Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer **Mailing Address** Occupation **Amount** Guaranteed City State **ZIP Code** Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer **Mailing Address** Occupation Amount Guaranteed **ZIP Code** City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation

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

State

ZIP Code

Amount

Guaranteed Outstanding:

City

¢	X)
¢	X	>
Ć	ſ)
¢	-)
ć	X	>
•	-	4
r	-	İ
ľ	ď	1
Ć	:)
Ç		ľ
F	-	1

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

PAGE 79 OF 119 FOR LINE NUMBER:

X	13a
	400

DANS			Detailed Surfinery Pa		(check only one)	<u> </u>	13a 13b
AME OF COMMITTEE (In Full) Citizens for Mike Assad, II	nc.		Transa	ection	ID : SC/10.4250		
LOAN SOURCE Full Name (La	st, First, Mic	ddle Initial)	[PERSONAL FUNDS]	Ele	ction: 2014		
Mike Assad					Primary General		
Mailing Address 106 Minnetonka Ave.					Other (specify)		
City		State ZIP Co	de				
Absecon		NJ 08201		<u>.</u> .			
Original Amount of Loan	41.90	Cumulative Payment To	Date Ba	lance	Outstanding at Close	of This	
Date Incurred M 06 M Date Incurred T 17 D Date Incurred T 20 List All Endorsers or Guaranto		Date Due	Interest Ra	وبمعييت	Sec	ured: Yes	X _{No}
Full Name (Last, First, Middle		O LOGIT OCCICE	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:	- 9			
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			<u>. </u>	
City	State	ZIP Code	Amount Guaranteed Outstanding:				
UBTOTALS This Period This Pag				روسي السياد		41.9	0
OTALS This Period (last page in Carry outstanding balance only to		· ·	- Chan	olemi ouemi	to enpreprieto lice e		

SCHEDULE C (FEC Form 3)

PAGE 80 OF 119

X	13a
П	13b

OANS	·		for each category of Detailed Summary F	f the (check only one)	3a 3b
IAME OF COMMITTEE (In Ful Citizens for Mike Assa	•		Trans	saction ID : SC/10.4251	
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Midd	dle Initial)	[PERSONAL FUNDS]	Primary General	
Mailing Address 106 Minnetonka Ave.				Other (specify) ▼	
City		State ZIP	Code		
Absecon		NJ 082	01		
Original Amount of Loan	26.00	Cumulative Payment	To Date B	dalance Outstanding at Close of This Po	eriod
Date Incurre	Ž013 Y	Date D		late Secured: .00	No
List All Endorsers or Gua		Loan Source	Name of Employer		
1. Full Name (Last, First,	Middle Iriital)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	viiddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP .Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, N	Viddle Initial)		Name of Employer	<u> </u>	
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, N	viiddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This	ge in this line only)			26.00	
Carry outstanding balance of	nly to line 3, sch	odule v, for this line.	ii no schedule D, carry 19	orward to appropriate line of Summa	ary.

Œ)
O	ì
U()
Œ)
O.)
	į
_	į
M	1
Œ)
7	Γ
,	

SCHEDULE & (FEC FOLLOANS	orm 3)			Use separate sch for each category Detailed Summary	of the	FOR LINE (check only		OF 119
NAME OF COMMITTEE (In Full) Citizens for Mike Assad	, Inc.			Tra	nsaction	ID : SC/10.42		11.00
LOAN SOURCE Full Name ((Last, First, Midd	lle Initial)		[PERSONAL FUND	Sj Ele	ction: 2014 Primary General		
Mailing Address 106 Minnetonka Ave.						Other (speci	<u> </u>	
City Absecon	:	State NJ	ZIP Code 08201	• ·				
Original Amount of Loan	20.00	Cumulative Pa		0.00	Balance	Outstanding a	t Close of	This Period
Date Incurred M 06 / P 23 P / Y List All Endorsers or Guaran	ž013 Y	M / D I		Interest None Y	Rate 0.00	% (apr)	Secur	ed:
Full Name (Last, First, Min		200.10		Name of Employer	<u> </u>			
Mailing Address		-		Occupation Amount				
City	State	ZIP Code		Guaranteed Outstanding:		.A., b. (0		
2. Full Name (Last, First, Mid	Idle Initial)			Name of Employer				-
Mailing Address			L	Occupation Amount				
City	State	ZIP Code		Guaranteed	- A - An -			
3. Full Name (Last, First, Mid	idle Initial)			Name of Employer		-		
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Mid	Idle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	4-0		, , , ,	
SUBTOTALS This Period This P								20.00
TOTALS This Period (last page Carry outstanding balance only				·		to appropria		

Q)	
Ø	
0	
œ	1
-	
 	
M	
☺	
ব	
-	

SCHEDULE C (FEC	Form 3)			Use separate sche	dule(s)	PAGE FOR LINE NUMB	82 OF 1
LOANS				for each category Detailed Summary		(check only one)	In. X 13.
NAME OF COMMITTEE (In F	•			Trar	saction	ID : SC/10.4253	
LOAN SOURCE Full Na	me (Last, First, Midd	le Initial)		[PERSONAL FUNDS	SJ Ele	ection: 2014	
Mike Assad						y '	
Mailing Address 106 Minnetonka Ave.		₋ ,		······································	76	General Other (specify) ▼	
City	{	State	ZIP Code				
Absecon		NJ	08201			·	
Original Amount of Loan	35.00	Cumulative Pa	-	0.00	Balance	Outstanding at Clos	e of This Per
TERMS Date Incu	rred		Date Due	Interest	Rate	s	ecured:
M06 ^M / P23 ^D /	[*] 2013 [*]	M / D D	/ /	None Y	0.00	% (apr)	Yes
List All Endorsers or Gu		Loan Source		-			
1. Full Name (Last, First	i, Middle Initial)			Name of Employer			
Mailing Address				Occupation			· · · · ·
				Amount Guaranteed	-	- Contraction of the second	
City	State	ZIP Code		Outstanding:			6
2. Full Name (Last, First,	Middle Initial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	-1-0-		
3. Full Name (Last, First,	Middle Initial)			Name of Employer			•
Mailing Address				Occupation			
				Amount			March Septemb
City	State	ZIP Code		Guaranteed Outstanding:	- -	حادث في المحادث	
4. Full Name (Last, First,	Middle Initial)	.		Name of Employer			
Mailing Address				Occupation		·	
City	State	ZIP Code		Amount Guaranteed			
J.,				Outstanding:	-4		
SUBTOTALS This Period TI	his Page (optional)			·····			35.00
TOTALS This Period (last p	age in this line only)	•••••••	•••••	>			
Carry outstanding balance	only to LINE 3, Sche	dule D, for thi	s line. If n	o Schedule D, carry	forward	to appropriate line	of Summar

SCHEDULE C (FEC Form 3) LC

PAGE 83 OF 119

OANS		for each category of Detailed Summary Pa	the (check only one) X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transa	ction ID : SC/10.4254
LOAN SOURCE Full Name (Last, First, Middle Mike Assad Mailing Address 106 Minnetonka Ave.	e Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify)
	tate ZIP Code NJ 08201	е	
47.17	Cumulative Payment To [ance Outstanding at Close of This Period
Date Incurred MO6 ^M / P23 ^D / Y 2013 Y		None Interest Rat	
List All Endorsers or Guarantors (if any) to l 1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	and the same of th
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:	and the solution of the soluti
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	Constitution of the Consti
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)			47.17
Carry outstanding balance only to LINE 3, Scheo	wie b, iei die Hie. Il V	o occioude o, carry for	mena to ephropitate into or oriningly.

M
(J)
Ŵ
0
Ø
1
Н
ИJ
0
J
_

CHEDULE C (FEC F	orm 3)		for each ca	ate schedule(s) ategory of the mmæry Page	FOR LINE NUMBER:	OF 1 X 13
IAME OF COMMITTEE (In Full) Citizens for Mike Assad	, Inc.			Transaction	n ID : SC/10.4255	
LOAN SOURCE Full Name Mike Assad	(Last, First, Mid	dle Initial)	[PERSONAL		ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.	, _				Other (specify)	
City			P Code 3201	_		
Original Amount of Loan	29.00	Cumulative Paymen	nt To Date		Outstanding at Close of T	his Pe
Date Incurred MO6M Date Incurred P24P V List All Endorsers or Guara	ž013	Date	Due Y None	nterest Rate	Secured % (apr)	X
1. Full Name (Last, First, M		Coan Source	Name of Emp	loyer		
Malling Address	-		Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Mi	ddle Initial)		Name of Emp	loyer	**	
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Mi	ddle Initial)		Name of Emp	oloyer		
Mailing Address			Occupation	, = 1 ₁₋₁		
City	State	ZIP Code	Amount Guaranteed Outstanding:	0		
4. Full Name (Last, First, Mi	ddle Initial)		Name of Emp	loyer		
Mailing Address			Occupation			-
City	State	ZIP Code	Amount Guaranteed Outstanding:			2
SUBTOTALS This Period This	Page (optional)			•	2 David how box flow flow flow	9.00
FOTALS This Period (last page Carry outstanding balance ont				Printer of Control	d to appropriate line of S	umms

4
Ø
Ø
0
¢
Н
-
M
0
J
-

SCHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) A PAGE 85 OF 119
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transactio	n ID : SC/10.4256
LOAN SOURCE Full Name (Last, Fin Mike Assad	st, Middle Initial)	*	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP C	ode	
Absecon	NJ 08201	·	
Original Amount of Loan	Cumulative Payment T		e Outstanding at Close of This Perio
Date Incurred M 06 / D 25 D / Y 2013 List All Endorsers or Guarantors (if		None 0.00	Secured: % (apr) Yes No
1. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Guaranteed	
2. Full Name (Last, First, Middle Initia	l)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (opt	tional)		35.00
TOTALS This Period (last page in this li	ne only)	·····	
Carry outstanding balance only to LINE	3, Schedule D, for this line. I	f no Schedule D, carry forwar	rd to appropriate line of Summary

ы
(T)
ഥ
0
∞
-
M
0
4

HEDULE C (FEC	Form 3)		Use separate schedule(s) for each category of the Detailed Summæry Page PAGE 86 OF 119 FOR LINE NUMBER: (check only one) 13a 13b
ME OF COMMITTEE (In Fulitizens for Mike Assa			Transaction ID : SC/10.4257
LOAN SOURCE Full Nam Mike Assad	ể (Last, First, Middle In	itial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City Absecon	State	ZIP Co 08201	de
Original Amount of Loan	Cun	nulative Payment To	-
Date Incurre	Ž013 Y M M	Date Due	Interest Rate Secured: None (apr)
List All Endorsers or Gua 1. Full Name (Last, First,		n Source	Name of Employer
Mailing Address			Occupation
City	State ZIF	Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	Aiddle Initial)		Name of Employer
Mailing Address			Occupation
City	State ZIF	² Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, N	Aiddle Initial)	(64, 156)	Name of Employer
Mailing Address			Occupation
City	State ZIF	² Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, N	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State ZIF	² Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This			

CHEDULE & (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page PAGE 87 OF 1*
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4258
LOAN SOURCE Full Name (Last, First, Mike Assad	Aiddle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City Absecon	State ZIP NJ 082	Code
Original Amount of Loan 28.48	Cumulative Payment	
Date Incurred Date Incurred Date Incurred Date Incurred	Date D	Oue Interest Rate Secured: Y None Y 0.00 % (apr) Yes
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)	to Loan Source	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:
UBTOTALS This Period This Page (optiona OTALS This Period (last page in this line o	• •	

SCHEDULE C (FEC LOANS	Form 3)] 1	Use separate sche for each category of Detailed Summary	of the	PAGE 88 OF 1 FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (In Fo	•		· · · · · · · · · · · · · · · · · · ·	Tran	saction	ID : SC/10.4259
LOAN SOURCE Full Nar Mike Assad	né (Last, First, Mid	dle Initial)	[P	PERSONAL FUNDS	ij Ele	ection: 2014 Primary General
Mailing Address 106 Minnetonka Ave.						Other (specify) ▼
City			ZIP Code		<u>1</u>	
Absecon		NJ	08201	**-		
Original Amount of Loan	30.00	Cumulative Paym	nent To Date	0.00	Balance	Outstanding at Close of This Per
Date Incur M07M / P01P / List All Endorsers or Gu	ž013 ' 'arantors (if any) to	M M / D D	te Due		Rate 0.00	Secured: % (apr) Yes
1. Full Name (Last, First,	Middle Initial)		Nar	me of Employer		
Mailing Address			·	cupation		
City	State	ZIP Code	Gua	aranteed tstanding:		
2. Full Name (Last, First,	Middle Initial)		Nar	me of Employer		
Mailing Address		<u>.</u>	Occ	cupation		
City	State	ZIP Code	Gua	ount aranteed standing:		
3. Full Name (Last, First,	Middle Initial)		Nar	me of Employer		
Mailing Address			Occ	cupation		
City	State	ZIP Code	Gua	ount aranteed standing:		
4. Full Name (Last, First,	Middle Initial)		Nar	ne of Employer		
Mailing Address			Occ	cupation		
City	State	ZIP Code	Gua	ount aranteed tstanding:		
SUBTOTALS This Period Th	is Page (optional)			······		30.00
TOTALS This Period (last pa	ge in this line only)		-		
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	line. If no S	chedule D, carry	forward	to appropriate line of Summar

¢
ത
Ø
0
೦೦

MJ
0
ব

CHEDULE C (FEC OANS	Form 3)	for each ca	te schedule(s) tegory of the mmary Page	PAGE 89 FOR LINE NUMBER: (check only one)	
NAME OF COMMITTEE (In Ful Citizens for Mike Assa	•		Transaction	ID : SC/10.4260	
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Middle Initial)	[PERSONAL	FUNDS] Ele	ction: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.				Other (specify) ▼	·
City	State	ZIP Code			
Absecon	NJ	08201 ————————————————————————————————————			
Original Amount of Loan		Payment To Date	Balance	Outstanding at Close o	f This Peri
Date Incum M07 ^M / P04 ^D / Y List All Endorsers or Gua	2013 Y M M M / D I	^y None ^y	0.00	Secu	red: Yes
1. Full Name (Last, First,	· · · · · · · · · · · · · · · · · · ·	Name of Empl	oyer		
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, N	Middle Initial)	Name of Empl	oyer		
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:	7		
3. Full Name (Last, First, I	/liddle Initial)	Name of Empl	oyer		
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, I	Aiddle Initial)	Name of Emp	oyer	T-17-17	
Mailing Address		Occupation			
City	State ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This	s Page (optional)		> L		30.00
TOTALS This Period (last page	ge in this line only)		>		ما الرسيان
Carry outstanding balance o	nly to LINE 3, Schedule D, for t	his line. If no Schedule D	, carry forward	to appropriate line of	Summai

g)
ග
ഥ
0
∞

\vdash
М
Θ
4
-

SCHEDULE S (FEC LOANS	Form 3)		,	Use separate for each cated Detailed Summer	gory of the	FOR LINE NUMBER: (check only one)	OF 119 X 13a 13b
NAME OF COMMITTEE (In Fu Citizens for Mike Assa	•				Transaction	ID : SC/10.4261	
LOAN SOURCE Full Nam Mike Assad	e (Last, First, Mid	dle Initial)		[PERSONAL F		ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.						Other (specify) ▼	
City		State	ZIP Code				
Absecon		NJ	08201				
Original Amount of Loan	27.00			ate 0.00		Outstanding at Close of	27.00
TERMS Date Incurred MO7 ^M / PO7 ^D / Y	ž013 *	M M / D D	N	oně ^v	0.00	% (apr)	ed:
1. Full Name (Last, First,		Loan Source		lame of Employ	er		
Mailing Address	<u> </u>		C	Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			_
2. Full Name (Last, First, I	Middle Initia!)		١	lame of Employ	er		
Mailing Address				Occupation		·	
City	State	ZIP Code		Amount Guaranteed Outstanding:			r_
3. Full Name (Last, First, I	Middle Initial)	· =		lame of Employ	er		
Mailing Address			C	Occupation			
City	State	ZIP Code		kmount Buaranteed Dutstanding:			
4. Full Name (Last, First, I	Middle Initial)		N	lame of Employ	er		
Mailing Address	· · · · · · · · · · · · · · · · · · ·		d	Decupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period Thi	s Page (optional)				¥ -		27.00
TOTALS This Period (last page	ge in this line only)					
Carry outstanding balance o	nly to LINE 3, Sch	edule D, for thi	is line. If no	Schedule D, c	arry forward	d to appropriate line of	Summary.

SCHEDULE C	(FEC	Form	3)
LOANS			

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 91 OF

X	13a
	13b

119

JANS		Detailed Summary Pag	ge (check only one)
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4262
LOAN SOURCE Full Name (Last, Firs	t, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mike Assad			General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP	Code	
Absecon	NJ 0820	01	
Original Amount of Loan	Cumulative Payment	To Date Bala	ance Outstanding at Close of This Period
30.00	• II II	0.00	30.00
Date Incurred	Date D		
M07M / P07P / Y 2013 Y		None 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	<u></u>
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City Sta	ate ZIP Code	Outstanding:	<u></u>
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City St	ate ZIP Code	Guaranteed Outstanding:	-g-r-r-g-r-n-n-n-
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City St	ate ZIP Code	Guaranteed Outstanding:	<u></u>
SUBTOTALS This Period This Page (opti	onal)	<u> </u>	30.00
TOTALS This Period (last page in this lin	e only)	• • • • • • • • • • • • • • • • • • •	
Carry outstanding balance only to LINE	3, Schedule D, for this line.	If no Schedule D, carry forv	ward to appropriate line of Summary.

CHEDULE C (FEC For	m 3)	Use separate schedule(s) for each category of the Detailed Summary Page PAGE 92 OF 119 FOR LINE NUMBER: (check only one) 13a 13b
ME OF COMMITTEE (In Full)	nc.	Transaction ID : SC/10.4263
LOAN SOURCE Full Name (La Mike Assad	st, First, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City	State Z	IP Code
Absecon	NJ (08201
Original Amount of Loan	Cumulative Paym	•
	33.59	0.00
Date Incurred Mo7M Date Incurred T 20 List All Endorsers or Guaranto	IŠ Y	e Due Interest Rate Secured: ' ' None ' (apr) Yes
1. Full Name (Last, First, Midd	e 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	nitial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle	nitial)	Name of Employer
Mailing Address		Occupation

SUBTOTALS This Period This Page (optional)

TOTALS 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.

State

ZIP Code

Amount

Guaranteed Outstanding:

City

N
0
۳.,
0
∞
-
H
M
0
ব
-

CHEDULE C (FEC F DANS	form 3)		Use separate schedu for each category of Detailed Summary P.	the (check only one) X 13a
AME OF COMMITTEE (In Full) Ditizens for Mike Assac			Trans	action ID : SC/10.4264
LOAN SOURCE Full Name Mike Assad	(Last, First, Mid	dle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.				Other (specify)
City		State ZIP	Code	
Absecon		NJ 082	201	
Original Amount of Loan	42.67	Cumulative Payment	0.00	alance Outstanding at Close of This Period
Date Incurred MO7M / D12D / Y List All Endorsers or Guard	ž013 Y	Date [CONTRACTOR SERVICES	
1. Full Name (Last, First, N			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Mi	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	
4. Full Name (Last, First, Mi	iddle Initial)		Name of Employer	
Mailing Address			Occupation	······································
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This	Page (optional)		>	42.67
OTALS This Period (last page	in this line only)	•	All and the second seco
arry outstanding balance onl	y to LINE 3, Sch	edule D, for this line	. If no Schedule D, carry fo	prward to appropriate line of Summar

M
☺
۳.
0
∞

7
M
0
ব
-

		PAGE 94 OF 119
HEDULE C (FEC	Form 3)	Use separate schedule(s) FOR LINE NUMBER: (check only one)
		Detailed Summary Page 13b
ME OF COMMITTEE (In Fullitizens for Mike Assa	•	Transaction 10 . 30/10.4203
LOAN SOURCE Full Name	é (Last, First, Middle Initial)	[PERSONAL FUNDS] Election: 2014
Mike Assad		Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City		P Code
Absecon	NJ 0	8201
Original Amount of Loan	Cumulative Payme	
<u> </u>		
Date Incurre	2013 Date 2013 Date A contract of any to Loan Source	Due Interest Rate Secured: V None 0.00 % (apr) Yes No
1. Full Name (Last, First,	· · · · · · · · · · · · · · · · · · ·	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, N	fiddle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Outstanding:
3. Full Name (Last, First, N	fiddle initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed
4. Full Name (Last, First, N		Outstanding:
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
UBTOTALS This Period This	s Page (optional)	
OTALS This Period (last page	ge in this line only)	

CHEDULE C (FEC Form	3)	Use separate schedule(for each category of the Detailed Summary Page	6 (check only one) X 13a
IAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc	3.	Transact	tion ID : SC/10.4266
LOAN SUURCE Full Name (Last Mike Assad	, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City Absecon	State ZIP C		
Original Amount of Loan	35.00	0.00	nce Outstanding at Close of This Period
Date Incurred M07M 19D Y 2013 List All Endorsers or Guarantors	tel Later Later La	e Interest Rate	
1. Full Name (Last, First, Middle		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Guaranteed	
2. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Guaranteed	
4. Full Name (Last, First, Middle	Initial)	Name of Employer	
Mailing Address	M. W	Occupation	
City	State ZIP Code	Guaranteed	
SUBTOTALS This Period This Page	(optional)	•	35.00
TOTALS This Period (last page in the	is line only)		
Carry outstanding balance only to I	INE 3, Schedule D, for this line.	If no Schedule D, carry forw	vard to appropriate line of Summar

L	ĺ	٦
¢	Ξ)
ľ		
¢	=)
¢	X	>
r	-	ł
F	-	1
h	í	ì
C	Ξ)
ς	J	ľ
r		ł

HEDULE C (FEC Form 3) ANS		Use separate schedule(s for each category of the Detailed Summary Page	(check only one) X 13
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc.		Transaction	on ID : SC/10.4267
LOAN SUURCE Full Name (Last, First, Mic Mike Assad	ddle Initial)	,,	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify) ▼
City	State ZIP Cod	de	
Absecon	NJ 08201		
Original Amount of Loan	Cumulative Payment To		ce Outstanding at Close of This Pe
Date Incurred M 07 M / P 19 P / Y 2013 Y List All Endorsers or Guarantors (if any) t		None 1 5 Tables	Secured: % (apr) Yes
Full Name (Last, First, Middle Initial) Mailing Address		Name of Employer Occupation	
City State	ZIP Code	Guaranteed	<u>, , , , , , , , , , , , , , , , , , , </u>
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:	
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line only			

ANS		Use separate schedule for each category of the Detailed Summary Pag	(check only one) X 13a
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4268
LOAN SOURCE Full Name (Last, Find Mike Assad	st, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Malling Address 106 Minnetonka Ave.			Other (specify)
City Absecon	State ZIP C		
Original Amount of Loan		0.00	nce Outstanding at Close of This Perio
TERMS Date Incurred M07M / P20P / Y 2013 Y	Date Du	e Interest Rate V None V 0.00	
List All Endorsers or Guarantors (if 1. Full Name (Last, First, Middle Initi		Name of Employer	
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initia	u)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle Initia	i)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City S	tate ZIP Code	Guaranteed	
UBTOTALS This Period This Page (opt	ional)	g -	40.00
OTALS This Period (last page in this lin	ne only)		

HEDULE C (FEC	Form 3)	Use separate schedule((check only one) X 13a
MINO		Detailed Summary Page	13b
ME OF COMMITTEE (In Ful	ll)	Transact	ion ID : SC/10.4269
tizens for Mike Assa	ad, Inc.		
LOAN SOURCE Full Nam	é (Last, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014
Mike Assad			Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZI	P Code	
Absecon	NJ 0	8201	
Original Amount of Loan	Cumulative Payme	ent To Date Balan	ace Outstanding at Close of This Period
	40.00	0.00	40.00
TERMS Data leaves	- Data	Due Internet Pete	Convends
Date Incurre	2013 M M / D / D /	Due Interest Rate	Secured:
m07m / 20g /	2013	None	% (apr) Yes No
List All Endorsers or Gua	arantors (if any) to Loan Source		
1. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	<u></u>
2. Full Name (Last, First, N	viiddle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
Oity			Marie Company to the Company of the
	Middle Initial)		
3. Full Name (Last, First, N	Viddle Initial)	Name of Employer	
	viiddle Initial)		
3. Full Name (Last, First, N		Name of Employer Occupation Amount	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
3. Full Name (Last, First, N	Middle Initial) State ZIP Code	Name of Employer Occupation Amount Guaranteed	~
3. Full Name (Last, First, Mailing Address	State ZIP Code	Name of Employer Occupation Amount	
3. Full Name (Last, First, Mailing Address City	State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Mailing Address City 4. Full Name (Last, First, Mailing Address)	State ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation	

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only)......

40.00

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 99

X	13a
	13b

119

OF

DANS		Detailed Summary Page	(check only one)	13a 13b
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transacti	on ID : SC/10.4332	
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	[PERSONAL FUNDS]	Election: 2014	
Mike Assad			Primary General	
Mailing Address 106 Minnetonka Ave.			Other (specify)	
City	State ZIP Cod	de		
Absecon	NJ 08201			
Original Amount of Loan	Cumulative Payment To	Date Baland	ce Outstanding at Close of T	his Period
Date Incurred MO7M / P20P / Y 2013 Y List All Endorsers or Guarantors (if any)	Date Due	Interest Rate None 0.00	Secured % (apr)	\boxtimes
Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer	·	
Mailing Address		Occupation		
City State	ZIP Code	Guaranteed		
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		
Malling 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:		
SUBTOTALS This Period This Page (optional	· · · · · · · · · · · · · · · · · ·			9.00
Carry outstanding balance only to LINE 3, S	chedule D, for this line. If a	no Schedule D, carry forwa	ard to appropriate line of Su	ummary.

DANS	3)	Use separate schedule(s) FOR LINE NUMBER:	×
AME OF COMMITTEE (In Full)).	Transaction ID : SC/10.4270	
LOAN SOURCE Full Name (Last, Mike Assad	First, Middle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼	
City	State ZI	P Code	
Absecon	NJ O	3201	
. ,,	Cumulative Payme		his 0.00
TERMS Date Incurred M07M Date Incurred T 22D T 2013	Date	Due Interest Rate Secured V None 0.00 % (apr) Yes	2
List All Endorsers or Guarantors 1. Full Name (Last, First, Middle		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
City 2. Full Name (Last, First, Middle I		Guaranteed	
		Guaranteed Outstanding:	
2. Full Name (Last, First, Middle I		Guaranteed Outstanding: Name of Employer	
2. Full Name (Last, First, Middle I Mailing Address	nitial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
2. Full Name (Last, First, Middle I Mailing Address City	nitial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
Pull Name (Last, First, Middle I Mailing Address City S. Full Name (Last, First, Middle I	nitial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer	
Pull Name (Last, First, Middle I Mailing Address City Second Control of the I Mailing Address Mailing Address	nitial) State ZIP Code nitial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle I Mailing Address City 3. Full Name (Last, First, Middle I Mailing Address City City	nitial) State ZIP Code nitial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only)......

SCHEDULE C (FEC Form 3) LO

Use separate schedule(s)

PAGE 101 OF 119

DANS			for each category of the Detailed Summary Page FOR LINE NUMBER (check only one)	X 13a
ME OF COMMITTEE (In Ful	•		Transaction ID : SC/10.4271	
LOAN SOURCE Full Nam Mike Assad Mailing Address 106 Minnetonka Ave.	e (Last, First, Mic	idle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General Other (specify) ▼	
		State 711		
City Absecon			201	
Original Amount of Loan		Cumulative Payme	_	f This Perio
	40.00	L. r.g.r.	0.00 1	40.00
Date Incurred Terms Date Incurred Terms Date Incurred Terms List All Endorsers or Gua	Ž013 Y	Date M'M / D'D /	None 0.00 % (apr)	red: Yes No
1. Full Name (Last, First,			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	<u></u>
2. Full Name (Last, First, N	fiddle Initial)		Name of Employer	<u> </u>
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	~
3. Full Name (Last, First, N	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, N	fiddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This OTALS This Period (last page)	e in this line only	r)		40.00

1

۳.,
☺
∞
-
-
М
0
ব
-

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page PAGE 102 OF 1 FOR LINE NUMBER: (check only one) X 13
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transaction ID : SC/10.4273
LOAN SOURCE Full Name (Last, First, Mid Mike Assad	dle Initial)	[PERSONAL FUNDS] Election: 2014 Primary
Mailing Address 106 Minnetonka Ave.		General Other (specify) ▼
City	State ZIP Co	de
Absecon Original Amount of Loan 39.28	Cumulative Payment To	
TERMS Date Incurred M 07 M / P 26 D / Y 2013 Y	Date Due	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	b Loan Source	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:
SUBTOTALS This Period This Page (optional)		

N
7
١,
0
∞
-
–
M
0
J
-

e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: (check only one)	OF 11
Transaction	ID : SC/10.4274	1 1 100
	ection: 2014 Primary General	
	Other (specify) ▼	
Balance	Outstanding at Close of	This Peri
Interest Rate	Secui % (apr)	ed:
of Employer		
ation		
nteed Inding:		
of Employer	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
pation		
nteed Inding:		
of Employer		
pation		
nt nteed inding:	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	<u></u>
of Employer	· · · · · · · · · · · · · · · · · · ·	
pation		
nt nteed unding:		
)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	30.00
• C		
		ule D, carry forward to appropriate line of

HEDULE C (FEC Form 3)	Use separate schedule(s) FOR LINE NUMBER:
ANS	for each category of the Detailed Summary Page (check only one) X 13
ME OF COMMITTEE (In Full) itizens for Mike Assad, Inc.	Transaction ID : SC/10.4275
LOAN SOURCE Full Name (Last, First, Middle Initial) Mike Assad	[PERSONAL FUNDS] Election: 2014
Mailing Address 106 Minnetonka Ave.	General Other (specify) ▼
City State ZIP C	
Absecon NJ 0820	1
Original Amount of Loan Cumulative Payment	
Date Incurred Date Du MO8M Date Incurred Date Du MO8M Date Du MO8M Date Du Date Du Date Du Date Du Date Du	e Interest Rate Secured: None 0.00 % (apr)
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
	Amount Guaranteed

SCHEDULE C (FEC Form 3) LO

Use separate schedule(s) FOR LINE NUMBER:

PAGE 105 OF

119

Citizens for Mike Assad, Inc. LOAN SOURCE Full Namé (Last, First, Middle Initial) Mike Assad Mailing Addrese 106 Minnetonka Ave. City State ZIP Code Original Amount of Loan Cumulative Payment Terms Date Incurred Date Dumon (Last, First, Middle Initial) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code	To Date Balance Outstanding at Close of This 9.20 0.00
Mailing Addresse 106 Minnetonka Ave. City State ZIP Code Absecon NJ 0820 Original Amount of Loan Cumulative Payment 1 9.20 TERMS Date Incurred Date Dute Dute Dute Dute Dute Dute Dute Du	Primary General Other (specify) ▼ Code Interest Rate Interest Rate None Name of Employer Occupation Amount Guaranteed
Absecon Original Amount of Loan Cumulative Payment 1 9.20 TERMS Date Incurred Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Mog M Date Du Mog M Mog M Mog M Mog D Do Do Do Do Do Do Do Do Do	To Date Balance Outstanding at Close of This 9.20 O.00 Interest Rate Secured: Y None Name of Employer Occupation Amount Guaranteed
Absecon Original Amount of Loan Cumulative Payment 1 9.20 TERMS Date Incurred Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Date Du Mog M Mog D Date Du Mog M Mog D Date Du Mog M Mog D Date Du Mog M Mog D Date Du Mog D M	To Date Balance Outstanding at Close of This 9.20 O.00 Interest Rate Secured: Y None Name of Employer Occupation Amount Guaranteed
TERMS Date Incurred Date Du Mog / D30 / Y2013 / M / D D / Y List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	9.20 Interest Rate Secured: None Name of Employer Occupation Amount Guaranteed
TERMS Date Incurred Date Dut Mo9M / Do / Y 2013 Y List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	9.20 Interest Rate Secured: Y None Name of Employer Occupation Amount Guaranteed
Date Incurred Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Date Durence Many / D D / D D / D	Name of Employer Occupation Amount Guaranteed
1. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	Occupation Amount Guaranteed
City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	Occupation Amount Guaranteed
City State ZIP Code 2. Full Name (Last, First, Middle Initial) Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	Amount Guaranteed
2. Full Name (Last, First, Middle Initial) Malling Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	Guaranteed
Mailing Address City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	
City State ZIP Code 3. Full Name (Last, First, Middle Initial) Mailing Address	Name of Employer
3. Full Name (Last, First, Middle Initial) Mailing Address	Occupation
Mailing Address	Amount Guaranteed Outstanding:
	Name of Employer
City State ZIP Code	Occupation
Silv Silv Silv Silv Silv Silv Silv Silv	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	0.00
Carry outstanding balance only to LINE 3, Schedule D, for this line.	

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

PAGE 106 OF 119

DANS		for each category of the Detailed Summary Page	(check only one) X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4448
LOAN SUURCE Full Name (Last, First, Middle Mike Assad Mailing Address 106 Minnetonka Ave.	e Initial)	[PERSONAL FUNDS]	Election: 2014 ☐ Primary General Other (specify) ▼
City S	tate ZIP Cod	e	
Absecon	NJ 08201		
Original Amount of Loan 36.28	Cumulative Payment To [Date Bala	ance Outstanding at Close of This Period
Date Incurred M 10 M / D 08 D / Y 2013 Y List All Endorsers or Guarantors (if any) to	rad [harad] hara	None 0.00	
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:	<u></u>
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:	<u>*</u>
SUBTOTALS This Period This Page (optional) FOTALS This Period (last page in this line only).			36.28

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page PAGE 107 OF 11 FOR LINE NUMBER: (check only one)
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transaction ID : SC/10.4449
LOAN SOURCE Full Name (Last, First, Millin Mike Assad	ddle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City	State ZIP Co	de
Absecon	NJ 08201	
Original Amount of Loan 25.82	Cumulative Payment To	Date Balance Outstanding at Close of This Peri 0.00 25.82
Date Incurred M 10 M / P 09 D / Y 2013 Y	Date Due	Interest Rate Secured: None O.00 (apr) Yes
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	to Loan Source	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 Stare	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:
SUBTOTALS This Period This Page (optional). TOTALS This Period (last page in this line only		

, ,	•
_	ł
٢	
Œ)
¢)
_	1
į=w	ł
М	١
C)
₹	ľ
	1

CHEDULE C (FEC Form DANS	3)			Use separate schedule for each category of the Detailed Summary Pag	10 (check only one) X 13a
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc).			Transac	tion ID : SC/10.4475
LOAN SOURCE Full Name (Last, Mike Assad	First, Midd	lle Initial)		[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼
City Absecon		State NJ	ZIP Code	9	L
Original Amount of Loan	0.00	Cumulative Pa		Date Bala	unce Outstanding at Close of This Perio
Date Incurred M 10 ^M / P 15 ^D / Y 2013 List All Endorsers or Guarantors	(if any) to	M / D 1		Interest Rate	
Full Name (Last, First, Middle)		Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle II	nitial)			Name of Employer	
Mailing Address			<u> </u>	Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle I	nitial)			Name of Employer	
Mailing Address		- 0.0		Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle II	nitial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page OTALS This Period (last page in thi					40.00

Ø
Ч
۲.
0
∞
~
-
M
0
ব

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page PAGE 109 OF 11
AME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		Transaction ID : SC/10.4476
LOAN SOURCE Full Name (Last, First, Mike Assad	Aiddle Initial)	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.		Other (specify) ▼
City Absecon	State ZIP NJ 082	Code 201
Original Amount of Loan	Cumulative Paymen	· · · · · · · · · · · · · · · · · · ·
Date Incurred M 10 / D 22 / Y 2013	Date [Due Interest Rate Secured: V None 0.00 % (apr) Yes
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	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:
SUBTOTALS This Period This Page (optional	ıl)	23.00
FOTALS This Period (last page in this line of		b. If no Schedule D, carry forward to appropriate line of Summan

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the

PAGE 110 OF 119 FOR LINE NUMBER:

(check only one)

X	13a
,	13b

CANS	Detailed Summary Page
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.	Transaction ID : SC/10.4477
LOAN SOURCE Full Name (Last, First, Middle Initial) Mike Assad	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.	Other (specify) ▼
City State ZIP Co	
Original Amount of Loan Cumulative Payment To	0.00 31.85
TERMS Date Incurred Date Due 10 10 Date Due	e Interest Rate Secured: None 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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:
SUBTOTALS This Period This Page (optional) TOTALS 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) LO

Use separate schedule(s)

FOR LINE NUMBER:

X	13a
	42h

PAGE 111 OF 119

DANS			Detailed Summary		(check only one)	×	13a 13b
ME OF COMMITTEE (In Ful	•		Trai	nsaction	ID : SC/10.4478		<u> </u>
LOAN SOURCE Full Nam Mike Assad	e' (Last, First, Middle	Initial)	[PERSONAL FUNDS	·	ection: 2014 Primary General		
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼		
City	Sta	ate ZIP	Code				
Absecon		NJ 0820	D1		 		
Original Amount of Loan	158.00	umulative Payment	To Date	Balance	Outstanding at Close o	f This	—:j
Date Incurre	d Ž013 Y	Date D		Rate 0.00	Secul		⊠ _{No}
List All Endorsers or Gua	rantors (if any) to L	oan Source				<u> </u>	
1. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:			ν	
2. Full Name (Last, First, N	Middle Initial)		Name of Employer				
Mailing Address	······································	· · · · · · · · · · · · · · · · · · ·	Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	-vv-		-r	
3. Full Name (Last, First, N	Middle Initial)	· · · ·	Name of Employer		 -		
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
4. Full Name (Last, First, N	Middle Initial)		Name of Employer	-			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:				
UBTOTALS This Period This	Page (optional)					158.0	XO
OTALS This Period (last pag	ge in this line only)		>				
Carry outstanding balance or	alv to LINE 3. Sched	ule D. for this line.	If no Schedule D. carry	forward	to appropriate line of	Sum	marv.

SCHEDULE C (FEC Form 3) LO

Use separate schedule(s) FOR LINE NUMBER:

PAGE 112 OF

119

DANS			for each cate Detailed Sum		(check only one)	X 13a
AME OF COMMITTEE (In Full Citizens for Mike Assa				Transaction	ID : SC/10.4479	—
LOAN SOURCE Full Name Mike Assad	d' (Last, First, Mid	dle Initial)	[PERSONAL F	T	ection: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City		State ZIP	Code			
Absecon		NJ 0820)1			
Original Amount of Loan	72.48	Cumulative Payment	To Date		Outstanding at Close o	
Date Incurre M 11 M / D 29 D / Y List All Endorsers or Guar	Ž013 Y	Date Do	le Int	erest Rate 0.00	Secul	red: YesN
1. Full Name (Last, First, I		- Loan Godice	Name of Emplo	yer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, M	liddle Initial)		Name of Emplo	yer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, M	liddle Initial)		Name of Emplo	yer		
Mailing Address	····		Occupation		·····	
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, M	liddle Initial)		Name of Emplo	yer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This	Page (optional)			>		72.48 **
OTALS This Period (last pag	e in this line only)				

HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of the Detailed Summary Pag	le (check only one) X 13a
ME OF COMMITTEE (In Full) tizens for Mike Assad, Inc.		Transac	tion ID : SC/10.4480
LOAN SOURCE Full Name (Last, First, M Mike Assad	fiddle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 106 Minnetonka Ave.			Other (specify)
City	State ZIP C	ode	
Absecon	NJ 08201		
Original Amount of Loan	Cumulative Payment To		nce Outstanding at Close of This Peri
11.99		0.00	11.99
Date Incurred	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any)	to Loan Source		% (apr) Yes
Full Name (Last, First, Middle Initial)	10 2001 000100	Name of Employer	····
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7.1.4.1.A.1.
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	-g(-g(-g(-g(-g(-g(-g(-g-
4. Full Name (Last, First, Middle Initial)		Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	

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

TOTALS This Period (last page in this line only).....

CHEDULE C (FEC	Form 3)		Use separate		PAGE 114	:	
DANS			for each cate Detailed Sum		(check only one)	×	13a 13b
AME OF COMMITTEE (In Ful Citizens for Mike Assa	•			Transaction	ID : SC/10.4481		-1
LOAN SOURCE Full Nam Mike Assad	é (Last, First, Mid	dle Initial)	[PERSONAL F	Ele	ction: 2014 Primary General		
Mailing Address 106 Minnetonka Ave.		***************************************			Other (specify)		
City		State ZIP C	ode				
Absecon		NJ 0820	1				
Original Amount of Loan		Cumulative Payment			Outstanding at Close of		Period
	44.00		0.00			44.0	
Date Incurred M 12 Y	ed Ž013	Date Du		erest Rate 0.00	% (apr)	ured: Yes	X _{No}
List All Endorsers or Gua	rantors (if any) to	Loan Source					
1. Full Name (Last, First,	Middle Initial)		Name of Employ	yer	**		-
Mailing Address		······································	Occupation				_
City	State	ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, N	Middle Initial)		Name of Employ	yer			
Mailing Address			Occupation				
City	State	ZIP Code	Guaranteed				
3. Full Name (Last, First, M	Middle Initial)		Name of Employ	yer	- W-2V		-
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation	 _			
City	State	ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, N	Middle Initial)		Name of Employ	yer			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed				

Outstanding:

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

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only)......

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 115 OF

119

Mailing Address 106 Minnetonka Ave. City State ZIP Code Absecon NJ 08201 Original Amount of Loan Cumulative Payment To Da TERMS Date Incurred Date Due M 12 M / D 20 D / Y 2013 Y M M M / D D / Y N. List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Transaction ID : SC/10.4482 [PERSONAL FUNDS] Election: 2014 Primary General Other (specify)
Mailing Address 108 Minnetonka Ave. City State ZIP Code Absecon NJ 08201 Original Amount of Loan Cumulative Payment To Da TERMS Date Incurred Date Due M12M / D2D / Y2013 MM M / D D / Y N List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address	Primary General
City State ZIP Code Absecon NJ 08201 Original Amount of Loan Cumulative Payment To Date TERMS Date Incurred Date Due M12M / P20P / Y2013 Y M M M / PP / N List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address	
Absecon Original Amount of Loan Cumulative Payment To Date Date Incurred Date Due M12M Date Incurred Date Due List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Malling Address	
TERMS Date Incurred Date Due 12 D O O O O O O O O O O O O O O O O O O	
Date Incurred Date Due M12M Date Due Date	_
Full Name (Last, First, Middle Initial) Mailing Address A	Interest Rate Secured: One (apr) Yes
	Name of Employer
	Occupation
	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:
SUBTOTALS This Period This Page (optional)	50.00
TOTALS This Period (last page in this line only)	

				
CHEDULE C (FEC	Form 3)		parate schedule(s)	PAGE 116 OF 1
ANS			category of the Summary Page	(check only one) X 13
ME OF COMMITTEE (In Fu	•		Transaction	n ID : SC/10.4484
	me (Last, First, Middle Initial)	[PERSON	IAL FUNDS]	ection: 2014
Mike Assad				Primary General
Mailing Address 106 Minnetonka Ave.				Other (specify) ▼
City	State	ZIP Code	<u></u>	*************************************
Absecon	NJ	08201		
Original Amount of Loan		ve Payment To Date	Balance	Outstanding at Close of This Pe
	200.00	0.	00	200.00
TERMS Date Incur	red	Date Due	Interest Rate	Secured:
		None /	0.00	% (apr)
List All Endorsers or Gu	arantors (if any) to Loan So	urce		
1. Full Name (Last, First,	, Middle Initial)	Name of E	mployer	
Mailing Address		Occupation	1	
		Amount		
City	State ZIP Cod	de Guaranteed Outstandin	il .	<u> </u>
2. Full Name (Last, First,	Middle Initial)	Name of E	mployer	
2. Full Name (Last, First, Mailing Address	Middle Initial)	Name of E		
Mailing Address		Occupation Amount	1	
	Middle Initial) State ZIP Cod	Occupation Amount	i	
Mailing Address	State ZIP Cod	Occupation Amount Guaranteed	d g:	
Mailing Address City	State ZIP Cod	Occupation Amount Guaranteec Outstandin	g:	
Mailing Address City 3. Full Name (Last, First, Mailing Address	State ZIP Cod	Occupation Amount Guaranteec Outstandin Name of E Occupation Amount	g:	
Mailing Address City 3. Full Name (Last, First,	State ZIP Cod	Occupation Amount Guaranteec Outstandin Name of E Occupation Amount	g: mployer	
Mailing Address City 3. Full Name (Last, First, Mailing Address	State ZIP Cod Middle Initial) State ZIP Cod	Occupation Amount Guaranteec Outstandin Name of E Occupation Amount Guaranteec	mployer	
Mailing Address City 3. Full Name (Last, First, Mailing Address City	State ZIP Cod Middle Initial) State ZIP Cod	Occupation Amount Guaranteec Outstandin Name of E Occupation Amount Guaranteec Outstandin	g: mployer	
Mailing Address City 3. Full Name (Last, First, Mailing Address City 4. Full Name (Last, First,	State ZIP Cod Middle Initial) State ZIP Cod	Occupation Amount Guaranteec Outstandin Name of E Occupation Amount Guaranteec Outstandin Name of E Occupation Amount Amount Amount Amount	g: mployer g: mployer	

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

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only)......

200.00

SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of t Detailed Summary Page	he	PAGE 117 FOR LINE NUMBER: (check only one)	 119 13a 13b
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, In	nc.		Transac	ction I	ID : SC/10.4486	
LOAN SOURCE Full Name (Las Mike Assad	st, First, Middle Initial)		[PERSONAL FUNDS]	I	ction: 2014 Primary General	
Mailing Address 106 Minnetonka Ave.					Other (specify) ▼	
City	State	ZIP Code)	<u> </u>		
Absecon	N.J	08201				

106 Minnetonka Ave.		
City	State ZIP	Code
Absecon	NJ 08	201
Original Amount of Loan	Cumulative Paymer	Balance Outstanding at Close of This Period 0.00 19.95
Date Incurred M12 ^M / P30 P / Y 2013 Y	Date	Oue Interest Rate Secured: Y None Y Out Out Out Out Out Out Out Out Out Out
List All Endorsers or Guarantors (if a 1. Full Name (Last, First, Middle Initia		Name of Employer
i. Full Name (Last, First, Wildlie mild	11)	Name of Employer
Mailing Address		Occupation
City St	ate ZIP Code	Amount Guaranteed
City	ate ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City St	ate ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
City St	ate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address		Occupation
City St	ate ZIP Code	Amount Guaranteed Outstanding:
INTOTALS This Period This Page (anti-	onall	10.05

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)		į	(Use	separate	PAGE	118 OF 119	
· · · · · · · · · · · · · · · · · · ·			edule(s) r each	FOR LINE NUMB			
					9 X 10		
NAME OF COMMITTEE (In Full)				-10-00-7-00-00		1v v1 · ·	
Citizens for Mike Assac	d, Inc.						
A. Full Name (Last, First, Middle Initial)nof Debtor or Creditor				Nature of Debt (Purpose): Credit Card Debt			
Capital One, N.A.				Oredit Care			
Mailing Address PO Box 71083							
City State	Zip Code						
Charlotte	NC	28272					
Outstanding Balance Beginning This Period				Transaction	on ID : SD10.4413		
1186.83							
Amount Incurred This Period	Payma	ent This Period		Outstandi	na Balance at Close	of This Period	
			11	Outstanding Balance at Close of This Period			
0.00	L_r_r_n_r	566.0		ليحح		620.83	
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor		- 1	Nature of D	ebt (Purpose):		
Capital One, N.A.			İ	Credit Card Debt			
Mailing Address PO Box 71083							
City State	Zip Code	28272					
Charlotte	NC	20212					
Outstanding Balance Beginning This Period				Transactio	on ID : SD10.4587		
0.00							
Amount Incurred This Period	Payme	ent This Period		Outstandi	ng Balance at Clos	e of This Period	
605.18		0.0	0			605.18	
C. Full Name (Last, First, Middle Initial) of Debte	or or Creditor		ľ	Nature of D Catering	ebt (Purpose):		
Ramada Vineland				Catering			
Mailing Address 2216 W Landis Ave							
ZETO V Landio Avo							
City	State	Zip Code					
Vineland	NJ	08360	i				
Outstanding Balance Beginning This Period				Transact	lon ID : SD10.4581		
0.00							
Amount Incurred This Period	Payme	ent This Period		Outstandi	ng Balance at Clos	e of This Period	
380.00		0.0	00	J		380.00	
Lanaran			لبب	لـــــــــــــــــــــــــــــــــــــ			
<u>- </u>		· ···		<u></u>	· · · · · · · · · · · · · · · · · · ·		
1) SUBTOTALS This Period This Page (optional)			. •	ليميم		1606.01	
M TOTALS This David float near this line country	r only)		_			;.	
2) TOTALS This Period (last page this line number only)							
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)							
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)							

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans	(Use separate schedule(s) for each numbered line)	PAGE 119 OF 119 FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTEE (In Full) Citizens for Mike Assad, Inc.		
A. Full Name (Last, First, Middle Initialmof Debtor or Creditor Uline Mailing Address PO Box 88741	Nature of E Office Sup	Debt (Purpose): oplies
City State Zip Code Chicago IL 60680		
Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period 67.86	iod Outstandi	ing Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Debt (Purpose):
Mailing Address City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period		ing Balance at Close of 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 Amount Incurred This Period Payment This Period		ing Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)		67.86
2) TOTALS This Period (last page this line number only)		1673.87 3356.91
TOTAL OUTSTANDING LOANS from Schedule C (last page only) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)		5030.78

FLAT RATE ENVELOPE DOMESTIC USE ONLY.

POSTAGE REQUIRED. PRIORITY MAIL

Flat Rate Envelope

ben

Flat Rate postage regardless of weight, destination or type of mailable material enclosed. Domestic use only.

Print Postage Online - Go to www.usps.com/postageonline

Recycled Paper 3

PLEASE PRESS FIRMLY

PLEASE PRESS FIRMLY

PLEASE PRESS FIRMLY

RECEIVED 1FEB -5 AM 11: 47 CENTER EC MAIL



POSTAL SERVICE ®

Click-N-Ship®

\$5.05 US POSTAGE Flat Rate Env

01/31/14

Mailed from 08201 062S0000001310

PRIORITY MAII

CITIZENS FOR MIKE ASSAD INC 106 MINNETONKA AVE ABSECON NJ 08201-2304

Expected Delivery Date: 02/03/2014

0006

C000

SHIP

TO: FEC

999 E ST NW WASHINGTON DC 20463-0001

USPS TRACKING #



9405 5036 9930 0224 8125 01

Electronic Rate Approved #038555749

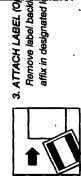
HOW TO USE:

ype or print return addressee informati COMPLETE ADDR

in designated area or on label.



2. PAYMENT METHOL Affix postage or me indicated in upper I



Remove label backi

affix in designated

or call 1-800-222-1 collection box ONL Bring your Priority N a post office, prese Stamped mail may

than 16 ounces.



UNITED STATES POSTAL SERVICE®

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt

The FEC added this page to the end of this hilling	to indicate now it was received.
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked V3V2014
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
N	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
J. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	2/5/2014
PREPARER (8/2013)	DATE PREPARED