

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.   
Donald M Payne, Jr. for Congress

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)     
CITY STATE ZIP CODE

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Williams, H., O'Neil, Mr.,

Signature of Treasurer Williams, H., O'Neil, Mr., [Electronically Filed] Date  /  /

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
Donald M Payne, Jr. for Congress

Report Covering the Period: From:  /  /  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))....	4541.50	492401.25
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	4541.50	492401.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	6001.03	498134.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6001.03	498134.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	91958.54	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Donald M Payne, Jr. for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	90060.00
(ii) Unitemized.....	41.50	5303.56
(iii) TOTAL of contributions from individuals ▶	41.50	95363.56
(b) Political Party Committees.....	0.00	1500.00
(c) Other Political Committees (such as PACs).....	4500.00	395537.69
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4541.50	492401.25
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	600.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	4541.50	493001.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6001.03	498134.74
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6001.03	498134.74

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93418.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4541.50
25. SUBTOTAL (add Line 23 and Line 24).....	97959.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6001.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	91958.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 7	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Donald M Payne, Jr. for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michigan Sugar Company Growers (Political Action Committee (PAC))**

Mailing Address 2600 S Euclid Ave

City Bay City	State MI	Zip Code 48706-3414
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FEC ID number of contributing federal political committee. **C** C00384354

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 09 / 2018

**Transaction ID : VN8ZJJWM4R3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**The National Postal Mail Handlers (LIUNA PAC)**

Mailing Address 905 16th St NW

City Washington	State DC	Zip Code 20006-1703
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FEC ID number of contributing federal political committee. **C** C00007922

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2018

**Transaction ID : VN8ZJK2HD43**

Amount of Each Receipt this Period  
3500.00

Memo Item

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Donald M Payne, Jr. for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Jersey Black Issues Convention</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2018	
Mailing Address PO Box 1843			FEC Identification Number C	
City Newark	State NJ	Zip Code 07101-1843	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Full Page Ad and photograph		Category/ Type 004	Transaction ID : VN80AACEBR6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Newark- NAACP</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2018	
Mailing Address P.O Box 1262			FEC Identification Number C	
City Newark	State NJ	Zip Code 07101-1262	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution -Cost of 10 tickets - Annual Gala		Category/ Type 004	Transaction ID : VN80AACEBT2	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Payne, Eric, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2018	
Mailing Address 111 Mulbery Street #5C			FEC Identification Number C	
City Newark	State NJ	Zip Code 07102	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Consulting Services - Fundraising Expenses 10/1/18 - 10/15/18		Category/ Type 003	Transaction ID : VN80AACEBV0	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 7			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Donald M Payne, Jr. for Congress**

Full Name (Last, First, Middle Initial) <b>A. Save Our Nation</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2018		
Mailing Address 4 S Orange Ave # 266			FEC Identification Number C		
City South Orange	State NJ	Zip Code 07079-1702	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Contributions		Category/ Type	Transaction ID : VN80AACEBS4		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Save Our Nation</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2018		
Mailing Address 4 S Orange Ave # 266			FEC Identification Number C		
City South Orange	State NJ	Zip Code 07079-1702	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Contributions		Category/ Type 012	Transaction ID : VN80AACEBW8		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00