

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

Office Use Only

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

New Jersey First

ADDRESS (number and street)

Riverfront Plaza Station

PO Box 200597

☐Check if different  
than previously  
reported. (ACC)

Newark

NJ

07102

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00391458

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

1 0

0 1

2 0 0 7

through

1 2

3 1

2 0 0 7

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

Vincent Rigolosi

Signature of Treasurer

Electronically Filed by Vincent Rigolosi

Date

0 4

0 2

2 0 0 8

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
New Jersey First

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		87040.26
(b) Cash on Hand at Beginning of Reporting Period .....	64972.45	
(c) Total Receipts (from Line 19) .....	27800.00	134791.12
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	92772.45	221831.38
7. Total Disbursements (from Line 31) .....	60630.00	189688.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	32142.45	32142.45
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	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New Jersey First

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	17800.00	76800.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	17800.00	76800.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	10000.00	15000.00
(c) Other Political Committees (such as PACs) .....	27800.00	91800.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	42991.12
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27800.00	134791.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27800.00	134791.12

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9030.00	41088.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	9030.00	41088.93
22. Transfers to Affiliated/Other Party Committees.....	5000.00	20000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	65000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2000.00
(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 28(a), (b), and (c)) .....	0.00	2000.00
29. Other Disbursements.....	31600.00	61600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	60630.00	189688.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60630.00	189688.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	27800.00	91800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27800.00	89800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9030.00	41088.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9030.00	41088.93

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 17

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

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

NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Angelica Berrie

Mailing Address 510 Priscilla Lane

City

Englewood

State

NJ

Zip Code

07631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Russ Berrie and Co., Inc.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 7

Transaction ID: SA11AI.5124

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charles R Bronfman

Mailing Address 838 5th Avenue

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.5122

Amount of Each Receipt this Period

5000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Scot Heagney

Mailing Address 115 River Road  
Suite 101

City

Edgewater

State

NJ

Zip Code

07020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Builder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.5125

Amount of Each Receipt this Period

5000.00

Contribution

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

15000.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Thomas Heagney

Mailing Address 66 King Avenue

City

Weehawken

State

NJ

Zip Code

07086

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Builder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11AI.5126

Amount of Each Receipt this Period

2800.00

Contribution

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

2800.00

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

17800.00

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

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

American Association for Justice PAC

Mailing Address 1050 31st Street N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 0 / 2 0 0 7

Transaction ID: SA11C.5127

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

National Air Traffic Controllers PAC

Mailing Address 1325 Massachusetts Avenue NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00238725

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 7

Transaction ID: SA11C.5129

Amount of Each Receipt this Period

5000.00

Contribution

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

10000.00

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

10000.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 17

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

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NAME OF COMMITTEE (In Full)  
New Jersey First

**A.**

Full Name (Last, First, Middle Initial)  
Common Sense Consulting

Mailing Address 222 Stony Brook Road

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: SB21B.5101

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Common Sense Consulting

Mailing Address 222 Stony Brook Road

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: SB21B.5105

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Common Sense Consulting

Mailing Address 222 Stony Brook Road

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement  
Administrative Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: SB21B.5107

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 17

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

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NAME OF COMMITTEE (In Full)  
New Jersey First

**A.**

Full Name (Last, First, Middle Initial)  
Next Level CDS Inc

Mailing Address PO Box 206

City Piscataway State NJ Zip Code 08855

Purpose of Disbursement  
Fundraising Services

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

**Transaction ID:** SB21B.5100

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Next Level CDS Inc

Mailing Address PO Box 206

City Piscataway State NJ Zip Code 08855

Purpose of Disbursement  
Fundraising Services

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

**Transaction ID:** SB21B.5104

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Next Level CDS Inc

Mailing Address PO Box 206

City Piscataway State NJ Zip Code 08855

Purpose of Disbursement  
Fundraising Services

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

**Transaction ID:** SB21B.5106

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

9000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 17

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

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

New Jersey Democratic State Committee

Mailing Address 196 West State Street

City  
Trenton

State  
NJ

Zip Code  
08608

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Annual

Transaction ID: SB22.5099

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 17

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

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NAME OF COMMITTEE (In Full)

New Jersey First

A.

Full Name (Last, First, Middle Initial)

Citizens for Harkin

Mailing Address PO Box 811

City  
Des Moines

State  
IA

Zip Code  
50304

Purpose of Disbursement  
Contribution

Candidate Name  
Thomas Richard Harkin

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 00

Transaction ID: SB23.5121

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Friends of Mark Warner

Mailing Address 201 North Union Suite 350

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Contribution

Candidate Name  
Mark Robert Warner

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 00

Transaction ID: SB23.5118

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Friends of Mark Warner

Mailing Address 201 North Union Suite 350

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Contribution

Candidate Name  
Mark Robert Warner

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 00

Transaction ID: SB23.5120

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

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

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NAME OF COMMITTEE (In Full)

New Jersey First

**A.** Full Name (Last, First, Middle Initial)  
Bergen County Democratic Organization

Mailing Address 50 Main Street

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Annual

Transaction ID: SB29.5113

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
Bergen County Democratic Organization

Mailing Address 50 Main Street

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Annual

Transaction ID: SB29.5114

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Burlington County Democratic Committee

Mailing Address PO Box 428

City Mount Holly State NJ Zip Code 08060

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District: Annual

Transaction ID: SB29.5109

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

2000.00

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

12000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 17

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

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)  
New Jersey First

**A.**

Full Name (Last, First, Middle Initial)

Democratic Assembly Campaign Committee

Mailing Address 130 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

State: District:

Transaction ID: SB29.5110

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Friends of Whelan Wilkins & Spellman

Mailing Address PO Box 362

City State Zip Code  
Northfield NJ 08225

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5115

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

2600.00

**C.**

Full Name (Last, First, Middle Initial)

Hughes for County Executive

Mailing Address 172 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5117

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

2000.00

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

9600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

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

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NAME OF COMMITTEE (In Full)  
New Jersey First

**A.**

Full Name (Last, First, Middle Initial)  
Senate Democratic Majority

Mailing Address 196 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: SB29.5112

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Union County Democratic Committee

Mailing Address 311 West Henry Street

City State Zip Code  
Linden NJ 07036

Purpose of Disbursement  
Contribution - Non-Federal

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Annual

Transaction ID: SB29.5108

Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

31600.00

Image# 28990727649

Form/Schedule: **SB21B** This disbursement is for the committee's own activities and is not made on behalf of any specifically identified federal candidate.  
Transaction ID: **SB21B.5100**

Form/Schedule: **SB21B** This disbursement is for the committee's own activities and is not made on behalf of any specifically identified federal candidate.  
Transaction ID: **SB21B.5104**

\*\*\*\*\*



Image# 28990727650

Form/Schedule: **SB21B** This disbursement is for the committee's own activities and is not made on behalf of any specifically identified federal candidate.  
Transaction ID: **SB21B.5106**

Form/Schedule: **SB23** The election designation for this transaction has been adjusted to identify the intended/correct designation (General 2008).  
Transaction ID: **SB23.5121**

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