

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Donald M Payne, Jr. for Congress

ADDRESS (number and street)

PO Box 2406

Check if different than previously reported. (ACC)

Newark

NJ

07114

2. FEC IDENTIFICATION NUMBER ▼

C C00519355

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

NJ

10

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 Mr. H. O'Neil Williams

Signature of Treasurer Mr. H. O'Neil Williams

[Electronically Filed]

Date

/  /

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 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

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)) ....	49910.00	250911.34
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	8425.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	48910.00	242486.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	40993.14	237457.67
(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)) .....	40993.14	237457.67
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	31296.33	
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 12/2003)

Write or Type Committee Name

**Donald M Payne, Jr. for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10900.00	58880.00
(ii) Unitemized.....	10.00	3506.34
(iii) TOTAL of contributions from individuals ▶	10910.00	62386.34
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	39000.00	188525.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	49910.00	250911.34
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	-986.02
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	49910.00	249925.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	40993.14	237457.67
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).....	1000.00	8425.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	8425.00
21. OTHER DISBURSEMENTS .....	0.00	16000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	41993.14	261882.67

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	23379.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	49910.00
25. SUBTOTAL (add Line 23 and Line 24).....	73289.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	41993.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	31296.33

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

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

FOR LINE NUMBER: PAGE 5 OF 32  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Robert T. Cottingham, Jr.**

Mailing Address 398 Tremont Ave.

City State Zip Code  
 Orange NJ 07050

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

Name of Employer Occupation  
 Sabre 88 Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 28 2016

**Transaction ID : VN8ZJEBJ308**

Amount of Each Receipt this Period  
 -800.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Daniel Gans**

Mailing Address 67 Jefferson St

City State Zip Code  
 Hoboken NJ 07030-1803

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

Name of Employer Occupation  
 Brownstone Company Chief Executive Officer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 10 2016

**Transaction ID : VN8ZJEBJ0X1**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 484 Broad Street

City State Zip Code  
 Newark NJ 07102-3225

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 10 2016

**Transaction ID : VN8ZJEBJ019**

Amount of Each Receipt this Period  
 1000.00

Memo Item

LLC - Members below if itemized. Permissible funds.

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

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

1200.00

**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 6 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Angelo J Genova**

Mailing Address 9 Frederick Court

City State Zip Code  
Cedar Grove NJ 07009

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

Name of Employer Occupation  
Genova Burns Gianomasi Webster, LLC Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ027**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey D Gural**

Mailing Address 300 Central Park W

City State Zip Code  
New York NY 10024-1513

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

Name of Employer Occupation  
Newark Grubb Knight Frank Real Estate Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ077**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**IMAC Insurance Agency, LLC**

Mailing Address 540 Mill St

City State Zip Code  
Belleville NJ 07109-1604

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ188**

Amount of Each Receipt this Period  
 1000.00

Memo Item

LLC - Members below if itemized. Permissible funds.

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

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

2000.00

**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 7 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Barry Maurillo**

Mailing Address 75 Devon Rd

City Essex Falls State NJ Zip Code 07021-1715

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

Name of Employer Caterers in the Park Occupation Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2Y2**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Joseph Maurillo**

Mailing Address 51 Dale Drive

City Chatham State NJ Zip Code 07928

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

Name of Employer Self Employed Occupation Construction

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2X4**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 15 Oakview Avenue

City Maplewood State NJ Zip Code 07040

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : VN8ZJEC3EZ9**

Amount of Each Receipt this Period  
500.00

Memo Item

2 Tickets for Congressional Ball

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 32  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**McEnerney, Brady & Company, LLC**

Mailing Address 293 Eisenhower Parkway  
Suite 270

City State Zip Code  
Livingston NJ 07039

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ1N0**

Amount of Each Receipt this Period  
 1000.00

Memo Item

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
**Francis McEnerney**

Mailing Address 293 Eisenhower Parkway  
Suite 270

City State Zip Code  
Livingston NJ 07039

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

Name of Employer Occupation  
McEnerney, Brady & Company LLC Managing Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ1P8**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 45 Blossom Cove Rd

City State Zip Code  
Red Bank NJ 07701-6302

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

Name of Employer Occupation  
Murphy Endeavors, LLC Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ1X1**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

2000.00



**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 9 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Barry Ostrowsky**

Mailing Address 950 Old Short Hills Road

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Occupation  
St Barnabas Health Systems President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : VN8ZJEBJ093**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Glenn F Scotland**

Mailing Address 96 Central Avenue

City State Zip Code  
Montclair NJ 07042-3016

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

Name of Employer Occupation  
McManimon & Scotland Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2J7**

Amount of Each Receipt this Period  
700.00

Memo Item

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

Mailing Address 96 Central Avenue

City State Zip Code  
Montclair NJ 07042-3016

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

Name of Employer Occupation  
McManimon & Scotland Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2016

**Transaction ID : VN8ZJEBJ2R5**

Amount of Each Receipt this Period  
300.00

Memo Item

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

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

2000.00

**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 10 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**William Stokes**

Mailing Address 429 East 2nd Ave

City Roselle State NJ Zip Code 07203

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

Name of Employer Bottom Line Club Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : VN8ZJEC3FD9**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Darrel K. Terry Sr.**

Mailing Address 186 Kilburn Place

City South Orange State NJ Zip Code 07079

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

Name of Employer Newark Beth Israel Medical Center Chil Occupation President & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ0S9**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 8 Willowdale Court

City Montclair State NJ Zip Code 07042

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

Name of Employer Public Service Electric & Gas Occupation VP Govt Affairs

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2M3**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

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

**2500.00**

**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 11 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Tonio Burgos & Associates of New Jersey, LLC**

Mailing Address 115 Broadway  
Rm 1504

City New York State NY Zip Code 10006-1619

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ1Z7**

Amount of Each Receipt this Period  
700.00

Memo Item

LLC - Members below if itemized. Permissible funds.

**B.** Full Name (Last, First, Middle Initial)  
**Tonio Burgos**

Mailing Address 115 Broadway

City New York State NY Zip Code 10006-1619

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

Name of Employer Occupation  
Tonio Burgos and Associates Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ205**

Amount of Each Receipt this Period  
700.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

700.00

10900.00

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

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

FOR LINE NUMBER: PAGE 12 OF 32  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Allergan , Inc . Political Action Committee (PAC)**

Mailing Address **400 Interpace Pkwy**  
**Bldg A**

City **Parsippany** State **NJ** Zip Code **07054-1120**

FEC ID number of contributing federal political committee. **C C00391086**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VN8ZJEC3F80**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)**

Mailing Address **777 6TH STREET, NW**  
**SUITE 200**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VN8ZJEC3F72**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**American Water Federal PAC**

Mailing Address **1025 Laurel Oak Rd**

City **Voorhees** State **NJ** Zip Code **08043-3506**

FEC ID number of contributing federal political committee. **C C00354548**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 24 / 2016**

**Transaction ID : VN8ZJEBHYW7**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

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

**4500.00**

**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 13 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Bonnie Watson Coleman for Congress**

Mailing Address **Bonnie Watson Coleman For Congress**  
**% Capitol Compliance Associates**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00558437**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VN8ZJEC3F56**

Amount of Each Receipt this Period  
**2000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bonnie Watson Coleman for Congress**

Mailing Address **Bonnie Watson Coleman For Congress**  
**% Capitol Compliance Associates**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00558437**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

**Transaction ID : VN8ZJEC3F64**

Amount of Each Receipt this Period  
**2000.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Council of Insurance Agents & Brokers PAC**

Mailing Address **701 Pennsylvania Ave NW**  
**Ste 950**

City **Washington** State **DC** Zip Code **20004-2608**

FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

**Transaction ID : VN8ZJECQYZ1**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

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

**5000.00**

**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 14 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Election Fund of Joseph Cryan**

Mailing Address 722 Greenwood Rd

City Union State NJ Zip Code 07083-7422

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBHZA8**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Eli Lilly & Co. PAC**

Mailing Address Corporate Center

City Indianapolis State IN Zip Code 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2016

**Transaction ID : VN8ZJEBHXS3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Gibbons P.C. PAC, Inc.**

Mailing Address One Gateway Center

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00412635

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ104**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2500.00

**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 15 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. Gridiron-PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address c/o National Football League  
280 Park Avenue, 17th Floor  
City New York State NY Zip Code 10017  
FEC ID number of contributing federal political committee. **C C00451153**  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2016  
**Transaction ID : VN8ZJECQZ09**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B. Honeywell International PAC (HIPAC)**  
Full Name (Last, First, Middle Initial)  
Mailing Address 101 Constitution Avenue, NW  
Suite 500W  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C C00096156**  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 29 / 2016  
**Transaction ID : VN8ZJEC3FE7**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**C. IBEW PAC VOLUNTARY FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 SEVENTH STREET N.W.  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C C00027342**  
Name of Employer Occupation  
Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016  
**Transaction ID : VN8ZJEBJ0Y9**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

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

2500.00

**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 16 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**International Longshoremen's Association AFL-CIO ( ILA COPE)**

Mailing Address 5000 W Side Ave  
Ste 100

City North Bergen State NJ Zip Code 07047-6439

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 04 / 2016

**Transaction ID : VN8ZJEBH32**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jeffries Team for Newark 2018**

Mailing Address PO Box 22235

City Newark State NJ Zip Code 07101-2235

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : VN8ZJEC3EY1**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address P.O. Box 33106

City Washington State DC Zip Code 20033

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2016

**Transaction ID : VN8ZJEC3F98**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

4000.00



**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 17 OF 32

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

**A.** Full Name (Last, First, Middle Initial)  
**L. Grace Spencer for Assembly**

Mailing Address 33 Morse Ave

City State Zip Code  
 East Orange NJ 07017-2116

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2A4**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lester E Taylor For Mayor Of East Orange**

Mailing Address 216 Woodland Ave

City State Zip Code  
 East Orange NJ 07017-2026

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2016

**Transaction ID : VN8ZJEBJ2F4**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 905 16TH STREET, NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2016

**Transaction ID : VN8ZJE7YG37**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

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

3500.00

**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 18 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**National Association of Insurance & Financial Advisors**

Mailing Address 2901 Telestar Ct  
2901 Telestar Court

City Falls Church State VA Zip Code 22042-1260

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : VN8ZJEBJ0Z6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sheet Metal Workers' Political Action League (PAL)**

Mailing Address 1750 New York Ave., NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 22 / 2016

**Transaction ID : VN8ZJE979D4**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Steamfitters Local 475 PAC**

Mailing Address P.O. Box 4187

City Warren State NJ Zip Code 07059

FEC ID number of contributing federal political committee. **C C00252395**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 10 / 2016

**Transaction ID : VN8ZJEBJ146**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**Toyota Motor North America, Inc PAC (Toyota/Lexus PAC)**

Mailing Address 601 13th St NW  
Ste 910

City Washington State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2016

**Transaction ID : VN8ZJECQY65**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UNITE HERE TIP CAMPAIGN COMMITTEE**

Mailing Address 275 Seventh Avenue, 11th Floor

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : VN8ZJEC3FA6**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**UNITE HERE TIP CAMPAIGN COMMITTEE**

Mailing Address 275 Seventh Avenue, 11th Floor

City New York State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2016

**Transaction ID : VN8ZJEC3FB4**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

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

11000.00

**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 20 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address **55 Glenlake PKWY NE**

City **Atlanta** State **GA** Zip Code **30328**

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2016**

**Transaction ID : VN8ZJEBJ239**

Amount of Each Receipt this Period  
**500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Wells Fargo & Co Employee PAC**

Mailing Address **Wells Fargo Center  
Sixth & Marquette**

City **Minneapolis** State **MN** Zip Code **55479**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 22 / 2016**

**Transaction ID : VN8ZJE979E2**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

**1500.00**

**39000.00**

**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 21 OF 32	
	<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. 1009-1011 Bergen Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 05 / 2016</b>
Mailing Address <b>1786 E 49th St</b>		Amount of Each Disbursement this Period <b>900.00</b>
City <b>Brooklyn</b> State <b>NY</b> Zip Code <b>11234-3708</b>	Purpose of Disbursement <b>Rent - Campaign Office - January 2016</b>	
Candidate Name	Category/Type <b>001</b>	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA0NQ27</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 1009-1011 Bergen Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2016</b>
Mailing Address <b>1786 E 49th St</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Brooklyn</b> State <b>NY</b> Zip Code <b>11234-3708</b>	Purpose of Disbursement <b>Rent - Campaign Office - Part Payment December 2015</b>	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA0RJK3</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. 1009-1011 Bergen Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2016</b>
Mailing Address <b>1786 E 49th St</b>		Amount of Each Disbursement this Period <b>400.00</b>
City <b>Brooklyn</b> State <b>NY</b> Zip Code <b>11234-3708</b>	Purpose of Disbursement <b>Rent - Campaign Office - Part Payment December 2015</b>	
Candidate Name	Category/Type <b>001</b>	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA0RJM1</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1800.00</b>
<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 22 OF 32	
	<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. 1009-1011 Bergen Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 01 / 2016</b>
Mailing Address 1786 E 49th St		Amount of Each Disbursement this Period <b>900.00</b>
City Brooklyn	State NY	
Zip Code 11234-3708	Purpose of Disbursement Campaign Office Rent - February 2016	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>001</b>	<b>Transaction ID : VN80AA0X2S6</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 1009-1011 Bergen Street LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 16 / 2016</b>
Mailing Address 1786 E 49th St		Amount of Each Disbursement this Period <b>900.00</b>
City Brooklyn	State NY	
Zip Code 11234-3708	Purpose of Disbursement Campaign Office Rent - April 2016	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>001</b>	<b>Transaction ID : VN80AA11VF2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airline Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 11 / 2016</b>
Mailing Address 1101 17th St NW Ste 600		Amount of Each Disbursement this Period <b>627.20</b>
City Washington	State DC	
Zip Code 20036-4718	Purpose of Disbursement Cost airline - Ticket	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type <b>002</b>	<b>Transaction ID : VN80AA12595</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2427.20</b>
<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 23 OF 32	
	<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. Femi Simeon Amorin</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 05 / 2016</b>
Mailing Address <b>9 Korwel Circle, East</b>		Amount of Each Disbursement this Period <b>3000.00</b>
City <b>West Orange</b> State <b>NJ</b> Zip Code <b>07052</b>	Purpose of Disbursement <b>Consulting Service - Accounting Services</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : VN80AA0NPS8</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 05 / 2016</b>
Mailing Address <b>499 S Capitol St SW Ste 422</b>		Amount of Each Disbursement this Period <b>5363.59</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4028</b>	Purpose of Disbursement <b>Consulting Services - Fundraising</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VN80AA0NPP4</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Angerholzer Broz Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 29 / 2016</b>
Mailing Address <b>499 S Capitol St SW Ste 422</b>		Amount of Each Disbursement this Period <b>4125.74</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4028</b>	Purpose of Disbursement <b>Consulting Services - Fundraising February 2016</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VN80AA0RJN9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12489.33</b>
<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 24 OF 32	
	<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. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 499 S Capitol St SW Ste 422		Amount of Each Disbursement this Period 4293.11 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA11TS8</b>
City Washington State DC Zip Code 20003-4028	Purpose of Disbursement Consulting - Fundraising Month of February 2016 Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Charleston Marriott Hotels</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2016
Mailing Address 170 Lockwood Blvd		Amount of Each Disbursement this Period 408.58 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA12570</b>
City Charleston State SC Zip Code 29403-5123	Purpose of Disbursement Cost of Hotels Lodging and Meals Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hotel Indigo</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 810 Broad St		Amount of Each Disbursement this Period 516.69 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0X2W0</b>
City Newark State NJ Zip Code 07102-2739	Purpose of Disbursement Breakfast - Fundraising Event Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5218.38
<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 25 OF 32	
	<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. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 30 / 2016</b>
Mailing Address <b>30 Ivy St SE</b>		Amount of Each Disbursement this Period <b>180.52</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-4006</b>	Purpose of Disbursement <b>Meals</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>001</b>	Transaction ID : <b>VN80AA0X2R9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Newark Emergency Services for Families</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 28 / 2016</b>
Mailing Address <b>982 Broad Street</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07102</b>	Purpose of Disbursement <b>Donations</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>012</b>	Transaction ID : <b>VN80AA11VV7</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, INC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 29 / 2016</b>
Mailing Address <b>1101 15th St Street</b>		Amount of Each Disbursement this Period <b>3150.00</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Purpose of Disbursement <b>Computer &amp; Web Services Inc 102794</b> <input type="checkbox"/> Memo Item	
Candidate Name	Category/Type <b>001</b>	Transaction ID : <b>VN80AA0SFV8</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3830.52</b>
<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 26 OF 32	
	<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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 11 / 2016</b>
Mailing Address <b>20 Waterview Blvd</b>		Amount of Each Disbursement this Period <b>54.00</b>
City <b>Parsippany</b> State <b>NJ</b> Zip Code <b>07054-1229</b>	Purpose of Disbursement <b>Payroll processing fee</b> <b>001</b> Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA124P5</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 28 / 2016</b>
Mailing Address <b>20 Waterview Blvd</b>		Amount of Each Disbursement this Period <b>104.00</b>
City <b>Parsippany</b> State <b>NJ</b> Zip Code <b>07054-1229</b>	Purpose of Disbursement <b>Payroll Processing Fee</b> <b>001</b> Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA12588</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2016</b>
Mailing Address <b>20 Waterview Blvd</b>		Amount of Each Disbursement this Period <b>160.00</b>
City <b>Parsippany</b> State <b>NJ</b> Zip Code <b>07054-1229</b>	Purpose of Disbursement <b>Payroll processing fee</b> <b>001</b> Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA125A3</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>318.00</b>
<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 27 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 20				

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

Full Name (Last, First, Middle Initial) <b>A. Eric Payne</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2016
Mailing Address 111 Mulbery Street #5C		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Newark	State NJ	
Zip Code 07102	Purpose of Disbursement Consulting Services - Fundraising	Transaction ID : VN80AA0RJC8
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eric Payne</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2016
Mailing Address 111 Mulbery Street #5C		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Newark	State NJ	
Zip Code 07102	Purpose of Disbursement Consulting Services - Fundraising	Transaction ID : VN80AA0RJ86
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Eric Payne</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2016
Mailing Address 111 Mulbery Street #5C		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City Newark	State NJ	
Zip Code 07102	Purpose of Disbursement Consulting Services - Fundraising	Transaction ID : VN80AA0X2V2
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<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 28 OF 32	
	<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. Eric Payne</b>		Date of Disbursement MM / DD / YYYY <b>02 / 29 / 2016</b>
Mailing Address <b>111 Mulbery Street #5C</b>		Amount of Each Disbursement this Period \$ <b>2000.00</b> <input type="checkbox"/> Memo Item
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07102</b>	Purpose of Disbursement <b>Consulting - Fundraising Month of 2/16/16 - 2/29/16</b>	
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VN80AA11V37</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Eric Payne</b>		Date of Disbursement MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>111 Mulbery Street #5C</b>		Amount of Each Disbursement this Period \$ <b>2000.00</b> <input type="checkbox"/> Memo Item
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07102</b>	Purpose of Disbursement <b>Consulting - Fundraising Month of 3/1/16 - 3/15/16</b>	
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VN80AA11VA2</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Eric Payne</b>		Date of Disbursement MM / DD / YYYY <b>03 / 29 / 2016</b>
Mailing Address <b>111 Mulbery Street #5C</b>		Amount of Each Disbursement this Period \$ <b>2000.00</b> <input type="checkbox"/> Memo Item
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07102</b>	Purpose of Disbursement <b>Consulting - Fundraising Month of 3/16/16 - 3/30/16</b>	
Candidate Name	Category/Type <b>003</b>	<b>Transaction ID : VN80AA11VW5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ <b>6000.00</b>
<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 29 OF 32	
	<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. Postmaster Newark</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 16 / 2016</b>
Mailing Address <b>920 Broad St Broad Street</b>		Amount of Each Disbursement this Period <b>980.00</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07102-2603</b>	Purpose of Disbursement <b>2000 Stamps - 2016 Annual Ball</b>	
Candidate Name	Category/Type <b>001</b>	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA11VD6</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PSE&amp;G</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 15 / 2016</b>
Mailing Address <b>1009 Bergen Street Floor 1</b>		Amount of Each Disbursement this Period <b>73.16</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07112-2044</b>	Purpose of Disbursement <b>Electric and Gas - Campaign Office - Jan &amp; Feb 2016</b>	
Candidate Name	Category/Type <b>001</b>	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA0X2X8</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PSE&amp;G</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 20 / 2016</b>
Mailing Address <b>1009 Bergen Street Floor 1</b>		Amount of Each Disbursement this Period <b>174.36</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07112-2044</b>	Purpose of Disbursement <b>Electric and Gas - Campaign Office - March 2016</b>	
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : VN80AA11VT9</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1227.52</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 32	
	<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. Union County Democratic Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 311 West Henry Street		Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0X2T4</b>
City Linden State NJ Zip Code 07036	Purpose of Disbursement Political Donation 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2016
Mailing Address 900 Grand Plaza Dr		Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA125B1</b>
City Houston State TX Zip Code 77067-4323	Purpose of Disbursement Cost of baggage 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2016
Mailing Address 900 Grand Plaza Dr		Amount of Each Disbursement this Period 575.70 <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA125C9</b>
City Houston State TX Zip Code 77067-4323	Purpose of Disbursement Cost Airline Ticket 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	900.70
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 32			
	<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. YMCA Newark</b>			Date of Disbursement MM / DD / YYYY 01 / 10 / 2016		
Mailing Address 600 Broad Street			Amount of Each Disbursement this Period 450.00		
City Newark	State NJ	Zip Code 07102	<input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0RJBO</b>		
Purpose of Disbursement Donation - MLK Breakfast		Category/Type 012			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016			
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	40661.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 32	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect M Teresa Ruiz</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2016</b>
Mailing Address <b>166 Bloomfield Ave</b>		Amount of Each Disbursement this Period <b>500.00</b> <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0RJG9</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07104-1127</b>	Purpose of Disbursement <b>Refund of Contribution</b> <input type="checkbox"/> 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Theodore Stephens</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2016</b>
Mailing Address <b>PO Box 811</b>		Amount of Each Disbursement this Period <b>250.00</b> <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0RJH7</b>
City <b>East Orange</b> State <b>NJ</b> Zip Code <b>07019-0811</b>	Purpose of Disbursement <b>Refund of Contribution of 7/20/15</b> <input type="checkbox"/> 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Friends of Ronald L. Rice</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2016</b>
Mailing Address <b>3234 Sanford Place</b>		Amount of Each Disbursement this Period <b>250.00</b> <input type="checkbox"/> Memo Item <b>Transaction ID : VN80AA0RJJ5</b>
City <b>Newark</b> State <b>NJ</b> Zip Code <b>07106</b>	Purpose of Disbursement <b>Refund of Contribution of 7/15/15</b> <input type="checkbox"/> 010 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2016</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1000.00</b>