

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
New Millennium PAC

ADDRESS (number and street) P.O. Box 32248  
Check if different than previously reported. (ACC) Newark NJ 07102-0648

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00349233 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 Year-End 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 (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2013 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2013

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 Abraham Antun

Signature of Treasurer Abraham Antun [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 07 / 31 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**New Millennium PAC**

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2013"/>  | <input type="text" value="155094.57"/> | <input type="text" value="155094.57"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="155094.57"/> |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="69000.00"/>  | <input type="text" value="69000.00"/>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="224094.57"/> | <input type="text" value="224094.57"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="60951.04"/>  | <input type="text" value="60951.04"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="163143.53"/> | <input type="text" value="163143.53"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="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

Write or Type Committee Name

**New Millennium PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 13500.00                      | 13500.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 13500.00                      | 13500.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 55500.00                      | 55500.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 69000.00                      | 69000.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 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 Transfers (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))..... ▶                        | 69000.00                      | 69000.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 69000.00                      | 69000.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated 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 .....   | 53851.04                      | 53851.04                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 53851.04                      | 53851.04                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 7000.00                       | 7000.00                           |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (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                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 100.00                        | 100.00                            |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated 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)) ..      | 60951.04                      | 60951.04                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 60951.04                      | 60951.04                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 69000.00                      | 69000.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 69000.00                      | 69000.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ▶ | 53851.04                      | 53851.04                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶               | 53851.04                      | 53851.04                          |

**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 OF 33                |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 |
|   |                              |                                   | <input type="checkbox"/> 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 Millennium PAC**

**A. Richard Sullivan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2709 Fairview Road  
City Raleigh State NC Zip Code 27608  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Capitol Counsel LLC Occupation Partner  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 05 / 01 / 2013  
**Transaction ID : C9737170**  
Amount of Each Receipt this Period 2500.00

**B. Frank F. Islam**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11808 Centurion Way  
City Potomac State MD Zip Code 20854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Frank Islam Investment Group, LLC Occupation Chairman & CEO  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 05 / 23 / 2013  
**Transaction ID : C9748731**  
Amount of Each Receipt this Period 2500.00

**C. Kate Moss**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1626 Foxhall Rd, NW  
City Washington State DC Zip Code 20007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Kate Moss Company Occupation President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 06 / 11 / 2013  
**Transaction ID : C9753789**  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... **7500.00**  
**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: (check only one)       | PAGE 7 OF 33                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**New Millennium PAC**

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

Mailing Address 5343 32nd Street, NW

City Washington State DC Zip Code 20015

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

Name of Employer Prime Policy Group Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2013  
**Transaction ID : C9748729**

Amount of Each Receipt this Period  
 1000.00

**B. David A. Castagnetti**  
Full Name (Last, First, Middle Initial)

Mailing Address 5607 Albia Road

City Bethesda State MD Zip Code 20816

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

Name of Employer Mehlman Vogel Castagnetti Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 17 / 2013  
**Transaction ID : C9781400A**

Amount of Each Receipt this Period  
 5000.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2013  
**Transaction ID : C9781400AB**

Amount of Each Receipt this Period  
 5000.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 6000.00  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 13500.00 |

**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 8 OF 33  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**New Millennium PAC**

Full Name (Last, First, Middle Initial)  
**A. National Association of Realtors PAC**

Mailing Address 430 North Michigan Avenue

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C C00030718**

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 |
| 03 |   |   | 29 |   |   | 2013 |   |   |   |

**Transaction ID : C9711190**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Lockheed Martin Corporation Employees' PAC**

Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C C00303024**

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 |
| 06 |   |   | 24 |   |   | 2013 |   |   |   |

**Transaction ID : C9780460**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. AT&T, Inc. Federal Political Action Committee**

Mailing Address 208 South Akard Street Suite 2701

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C C00109017**

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 |
| 06 |   |   | 03 |   |   | 2013 |   |   |   |

**Transaction ID : C9753790**

Amount of Each Receipt this Period  
5000.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 15000.00 |
| <b>TOTAL</b> 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: (check only one)       | PAGE 9 OF 33  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**New Millennium PAC**

**A. United Food & Commercial Workers Int'l Union, ABC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1775 K Street, NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00002766  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2013  
**Transaction ID : C9765210**  
 Amount of Each Receipt this Period  
 5000.00

**B. Westfield Development, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11601 Wilshire Blvd  
 11th Floor  
 City Los Angeles State CA Zip Code 90025  
 FEC ID number of contributing federal political committee. **C** C00343392  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2013  
**Transaction ID : C9737171**  
 Amount of Each Receipt this Period  
 2500.00

**C. US-Cuba Democracy Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 West 49th Street  
 City Hialeah State FL Zip Code 33012  
 FEC ID number of contributing federal political committee. **C** C00387720  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : C9778372**  
 Amount of Each Receipt this Period  
 5000.00

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 12500.00 |
| <b>TOTAL</b> 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: (check only one)       | PAGE 10 OF 33   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**New Millennium PAC**

Full Name (Last, First, Middle Initial)  
**A. Novartis Corporation Political Action Committee**

Mailing Address 701 Pennsylvania Avenue, NW  
Suite 725

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2013  
**Transaction ID : C9748733**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. American Federation of State County & Municipal Employees PEOPLE**

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2013  
**Transaction ID : C9778364**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. American Postal Workers Union COPA**

Mailing Address 1300 L Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2013  
**Transaction ID : C9778375**

Amount of Each Receipt this Period  
1000.00

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5500.00 |
| <b>TOTAL</b> 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 11 OF 33  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**New Millennium PAC**

Full Name (Last, First, Middle Initial)  
**A. International Association of Fire Fighters FIREPAC**  
 Mailing Address 1750 New York Ave NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C C00029447**  
 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 Y  
 06 / 21 / 2013  
**Transaction ID : C9778367**  
 Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**B. Depository Trust and Clearing Corporation PAC**  
 Mailing Address 601 13th Street NW  
 Suite 580 South  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00497917**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 10 / 2013  
**Transaction ID : C9741927**  
 Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**C. Real Estate Roundtable PAC (REALPAC)**  
 Mailing Address 801 Pennsylvania Avenue  
 Suite 720  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C C00033779**  
 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 Y  
 05 / 22 / 2013  
**Transaction ID : C9748717**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00  
**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: (check only one)       | PAGE 12 OF 33   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 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 Millennium PAC**

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. American Dental Association PAC</b>  |          | Date of Receipt   |
| Mailing Address 1111 14th St, NW<br>Suite 1100  |          | <input type="text" value="06"/> / <input type="text" value="29"/> / <input type="text" value="2013"/> |
| City Washington   | State DC | Zip Code 20005  |
| FEC ID number of contributing federal political committee. <b>C C00000729</b>   |          | <b>Transaction ID : C9780458</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="2500.00"/>                            |
| Aggregate Year-to-Date ▼<br><input type="text" value="2500.00"/>  |          |   |

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Comcast Corporation Political Action Committee</b>                             |          | Date of Receipt   |
| Mailing Address One Comcast Center<br>49th Floor  |          | <input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2013"/> |
| City Philadelphia   | State PA | Zip Code 19103  |
| FEC ID number of contributing federal political committee. <b>C C00248716</b>   |          | <b>Transaction ID : C9748718</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="2500.00"/>                            |
| Aggregate Year-to-Date ▼<br><input type="text" value="2500.00"/>  |          |   |

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Prudential Financial, Inc State &amp; Federal PAC</b>                          |          | Date of Receipt   |
| Mailing Address 751 Broad Street<br>14th Floor  |          | <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2013"/> |
| City Newark   | State NJ | Zip Code 07102  |
| FEC ID number of contributing federal political committee. <b>C C00493304</b>   |          | <b>Transaction ID : C9778379</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="5000.00"/>                            |
| Aggregate Year-to-Date ▼<br><input type="text" value="5000.00"/>  |          |   |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="10000.00"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value="55500.00"/> |

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW  
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2013

**Transaction ID : D676560**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2013

**Transaction ID : D682840**

Amount of Each Disbursement this Period

64.24

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2013

**Transaction ID : D688370**

Amount of Each Disbursement this Period

64.24

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

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

428.48

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P.O. Box 4890

City State Zip Code  
Trenton NJ 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
05 / 14 / 2013

**Transaction ID : D683030**

Amount of Each Disbursement this Period

219.00

Full Name (Last, First, Middle Initial)

**B. Connectiva Inc.**

Mailing Address 221 Normandy Drive

City State Zip Code  
Silver Spring MD 20901

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
05 / 23 / 2013

**Transaction ID : D683380**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Democratic Committee Of Bergen County**

Mailing Address 8 Bridge Street

City State Zip Code  
Hackensack NJ 07601

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
03 / 28 / 2013

**Transaction ID : D679050**

Amount of Each Disbursement this Period

1000.00

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

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

6219.00

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address 1201 Third Avenue  
40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 31 / 2013

**Transaction ID : D676502**

Amount of Each Disbursement this Period

1613.28

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P.O. Box 4890

City State Zip Code  
Trenton NJ 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
02 / 28 / 2013

**Transaction ID : D677892**

Amount of Each Disbursement this Period

104.43

Full Name (Last, First, Middle Initial)

**C. Perkins Coie LLP**

Mailing Address 1201 Third Avenue  
40th Floor

City State Zip Code  
Seattle WA 98101

Purpose of Disbursement  
Legal & Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
05 / 23 / 2013

**Transaction ID : D683422**

Amount of Each Disbursement this Period

9132.15

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

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

10849.86

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2013

**Transaction ID : D680262**

Amount of Each Disbursement this Period

6.36

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 04 / 2013

**Transaction ID : D676303**

Amount of Each Disbursement this Period

60.21

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 4890

City Trenton State NJ Zip Code 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 31 / 2013

**Transaction ID : D676563**

Amount of Each Disbursement this Period

103.03

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

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

169.60



**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc.**

Mailing Address 1101 15th Street, NW  
Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Database Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2013

**Transaction ID : D683423**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B. New Jersey State Society**

Mailing Address P.O. Box 65086

City Washington State DC Zip Code 20035

Purpose of Disbursement  
Tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 15 / 2013

**Transaction ID : D674463**

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 08 / 2013

**Transaction ID : D680263**

Amount of Each Disbursement this Period

60.21

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

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

7860.21

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P.O. Box 4890

City State Zip Code  
Trenton NJ 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2013

**Transaction ID : D683424**

Amount of Each Disbursement this Period

120.21

Full Name (Last, First, Middle Initial)

**B. New Jersey State Building Trades Council**

Mailing Address 77 Brant Avenue

City State Zip Code  
Clark NJ 07066

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 06 / 2013

**Transaction ID : D684214**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 4890

City State Zip Code  
Trenton NJ 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 01 / 2013

**Transaction ID : D680214**

Amount of Each Disbursement this Period

209.94

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

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

1830.15

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D676305**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. National Herald**

Mailing Address 37-10 30th Street

City Long Island City State NY Zip Code 11101

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D683425**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P.O. Box 4890

City Trenton State NJ Zip Code 08650

Purpose of Disbursement  
Telephone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D683775**

Amount of Each Disbursement this Period

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

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. New Jersey State AFL-CIO**

Mailing Address 106 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Advertisement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2013

**Transaction ID : D684215**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Connectiva Inc.**

Mailing Address 221 Normandy Drive

City State Zip Code  
Silver Spring MD 20901

Purpose of Disbursement  
Catering & Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2013

**Transaction ID : D685045**

Amount of Each Disbursement this Period

642.69

Full Name (Last, First, Middle Initial)

**C. Connectiva Inc.**

Mailing Address 221 Normandy Drive

City State Zip Code  
Silver Spring MD 20901

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2013

**Transaction ID : D684197**

Amount of Each Disbursement this Period

5000.00

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

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

6642.69

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Connectiva Inc.**

Mailing Address 221 Normandy Drive

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 11 / 2013

**Transaction ID : D680377**

Amount of Each Disbursement this Period

5000.00

**B. Connectiva Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 221 Normandy Drive

City Silver Spring State MD Zip Code 20901

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2013

**Transaction ID : D678998**

Amount of Each Disbursement this Period

5000.00

**C. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 05 / 2013

**Transaction ID : D682839**

Amount of Each Disbursement this Period

120.42

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

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

10120.42

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 10200 Sunset Drive

City Miami State FL Zip Code 33173

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : D688369**

Amount of Each Disbursement this Period

64.24

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : D682377**

Amount of Each Disbursement this Period

-90.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 03 / 2013

**Transaction ID : D670608**

Amount of Each Disbursement this Period

1436.77

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

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

1501.01

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2013

Transaction ID : **D670609**

Amount of Each Disbursement this Period

1436.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2013

Transaction ID : **D678314**

Amount of Each Disbursement this Period

1633.79

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2013

Transaction ID : **D678321**

Amount of Each Disbursement this Period

90.00

[MEMO ITEM]

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

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

1633.79

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. The Monocle**

Mailing Address 107 D Street, SE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 04    |   | 2013      |

**Transaction ID : D678315**

Amount of Each Disbursement this Period

|        |
|--------|
| 219.52 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Ristorante Tosca**

Mailing Address 1112 F Street, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 04    |   | 2013      |

**Transaction ID : D678316**

Amount of Each Disbursement this Period

|        |
|--------|
| 264.20 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 04    |   | 2013      |

**Transaction ID : D678319**

Amount of Each Disbursement this Period

|        |
|--------|
| 889.42 |
|--------|

[MEMO ITEM]

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

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

|      |
|------|
| 0.00 |
|------|

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**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : D680266**

Amount of Each Disbursement this Period

2301.00

Full Name (Last, First, Middle Initial)

**B. Biltmore Hotel**

Mailing Address 1200 Anastasia Avenue

City Coral Gables State FL Zip Code 33134

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : D680270**

Amount of Each Disbursement this Period

191.76

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. US Senate Gift Shop**

Mailing Address US Senate

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Gift for Donor

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2013

**Transaction ID : D680267**

Amount of Each Disbursement this Period

289.00

**[MEMO ITEM]**

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

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

2301.00

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Paris Caterers**

Mailing Address 2258 25th Place, NE

City Washington State DC Zip Code 20018

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03    | / | 29    | / | 2013        |

**Transaction ID : D680268**

Amount of Each Disbursement this Period

|         |
|---------|
| 1118.00 |
|---------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 03    | / | 29    | / | 2013        |

**Transaction ID : D680269**

Amount of Each Disbursement this Period

|        |
|--------|
| 702.24 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Citi Credit Cards**

Mailing Address P.O. Box 183037

City Columbus State OH Zip Code 43218

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 10    | / | 2013        |

**Transaction ID : D681942**

Amount of Each Disbursement this Period

|        |
|--------|
| 560.23 |
|--------|

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

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

|        |
|--------|
| 560.23 |
|--------|

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**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Biltmore Hotel**

Mailing Address 1200 Anastasia Avenue

City State Zip Code  
Coral Gables FL 33134

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04    | / | 10    | / | 2013      |

**Transaction ID : D681945**

Amount of Each Disbursement this Period

|        |
|--------|
| 327.05 |
|--------|

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City State Zip Code  
Newark NJ 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    | / | 03    | / | 2013      |

**Transaction ID : D682374**

Amount of Each Disbursement this Period

|        |
|--------|
| 960.12 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City State Zip Code  
Washington DC 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    | / | 03    | / | 2013      |

**Transaction ID : D682376**

Amount of Each Disbursement this Period

|        |
|--------|
| 915.23 |
|--------|

**[MEMO ITEM]**

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

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

|        |
|--------|
| 960.12 |
|--------|

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**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D683461**

Amount of Each Disbursement this Period

533.80

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D683462**

Amount of Each Disbursement this Period

35.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : D683464**

Amount of Each Disbursement this Period

480.80

**[MEMO ITEM]**

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

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

533.80

**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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : D685267**

Amount of Each Disbursement this Period

1431.83

Full Name (Last, First, Middle Initial)

**B. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Meals

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : D688383**

Amount of Each Disbursement this Period

688.83

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Moran Car Service**

Mailing Address 201 Ogden Avenue

City Jersey City State NJ Zip Code 07307

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 26 / 2013

**Transaction ID : D688385**

Amount of Each Disbursement this Period

508.00

**[MEMO ITEM]**

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

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

1431.83

# 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)

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

### A. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 6 |   | 2 | 0 | 1 | 3 |   |   |

Transaction ID : D688387

Amount of Each Disbursement this Period

|   |   |   |   |   |
|---|---|---|---|---|
| 3 | 5 | . | 0 | 0 |
|---|---|---|---|---|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |

Amount of Each Disbursement this Period

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |

Amount of Each Disbursement this Period

|  |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|--|--|--|--|--|

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

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

|   |   |   |   |
|---|---|---|---|
| 0 | . | 0 | 0 |
|---|---|---|---|

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 5 | 3 | 5 | 0 | 8 | . | 5 | 4 |
|---|---|---|---|---|---|---|---|

**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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. New Jersey Democratic State Committee**

Mailing Address 196 West State Street

City State Zip Code  
Trenton NJ 08608

Purpose of Disbursement  
Void of 10/2012 check

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 21    | / | 2013      |

**Transaction ID : D677510**

Amount of Each Disbursement this Period

|          |
|----------|
| -5000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**B. Friends of Mark Warner**

Mailing Address 201 North Union, Suite 300

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Contribution

Candidate Name

**Mark Warner**

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 21    | / | 2013      |

**Transaction ID : D685181**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. People for Rick Weiland**

Mailing Address PO Box 1488

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement  
Contribution

Candidate Name

**Rick Weiland**

Office Sought:  House  
 Senate  
 President  
State: SD District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 21    | / | 2013      |

**Transaction ID : D685182**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

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

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

|      |
|------|
| 0.00 |
|------|

|  |
|--|
|  |
|--|

**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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Mary Landrieu, Inc.**

Mailing Address 700 13th Street, NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name  
**Mary Landrieu**

Office Sought:  House  
 Senate  
 President  
State: LA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 19    | / | 2013        |

**Transaction ID : D685123**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Hagan for US Senate Inc.**

Mailing Address PO Box 29103

City Greensboro State NC Zip Code 27429

Purpose of Disbursement  
Contribution

Candidate Name  
**Kay R. Hagan**

Office Sought:  House  
 Senate  
 President  
State: NC District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 27    | / | 2013        |

**Transaction ID : D685273**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Schatz for Senate**

Mailing Address PO Box 3828

City Honolulu State HI Zip Code 96812

Purpose of Disbursement  
Contribution

Candidate Name  
**Brian Schatz**

Office Sought:  House  
 Senate  
 President  
State: HI District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    | / | 20    | / | 2013        |

**Transaction ID : D685124**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

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

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

|         |
|---------|
| 7000.00 |
|---------|

|  |
|--|
|  |
|--|



**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)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Peters for Michigan**

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement  
Contribution

Candidate Name  
**Gary Peters**

Office Sought:  House  
 Senate  
 President  
State: MI District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 25    | / | 2013      |

**Transaction ID : D685236**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Jeff Merkley for Oregon**

Mailing Address PO Box 42307

City Portland State OR Zip Code 97242

Purpose of Disbursement  
Contribution

Candidate Name  
**Jeff Merkley**

Office Sought:  House  
 Senate  
 President  
State: OR District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    | / | 25    | / | 2013      |

**Transaction ID : D685237**

Amount of Each Disbursement this Period

|         |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Pascrell For Congress**

Mailing Address P.O. Box 640

City Totowa State NJ Zip Code 07511

Purpose of Disbursement  
Void of 10/2012 check

Candidate Name  
**William Pascrell**

Office Sought:  House  
 Senate  
 President  
State: NJ District: 09

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 21    | / | 2013      |

**Transaction ID : D677509**

Amount of Each Disbursement this Period

|          |
|----------|
| -5000.00 |
|----------|

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

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

|      |
|------|
| 0.00 |
|------|

|         |
|---------|
| 7000.00 |
|---------|