

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED 2011 DEC 13 AM 9:08 FEC MAIL CENTER

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

New Jersey Citizen Action Political Action Committee - NJCA PAC

ADDRESS (number and street) 744 Broad Street Suite 2080 Newark NJ 07102

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00231217

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), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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 [] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [] in the State of []

5. Covering Period 01/01/2011 through 06/30/2011

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 David Weiner

Signature of Treasurer [Signature] Date 09/01/2011

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 table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NJCA PAC

Report Covering the Period:

From:

01 / 01 / 2011

To:

06 / 30 / 2011

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

2011

3,280.59

(b) Cash on Hand at
Beginning of Reporting Period.....

3,280.59

(c) Total Receipts (from Line 19)

~~0.00~~

0.00

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

~~3,280.59~~

3,280.59

7. Total Disbursements (from Line 31)

~~0.00~~

0.00

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

3,280.59

3,280.59

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

0.00

0.00

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

0.00

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

11030693655

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NJCA PAC

Report Covering the Period: From:

01 / 01 / 2011

To:

06 / 30 / 2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

Grid for Column A: Total This Period. Contains 18 rows of empty boxes for data entry.

Grid for Column B: Calendar Year-to-Date. Contains 18 rows of empty boxes for data entry.

Grid for Line 19: Total Receipts. Contains one empty box with a circled 'X' over it.

Grid for Line 20: Total Federal Receipts. Contains one empty box with a circled 'X' over it.

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

11030693657

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0	0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

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**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 / OF /

<input 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
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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)

NJCA PAC

Full Name (Last, First, Middle Initial)		Date of Receipt	
A. Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial)		Date of Receipt	
B. Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial)		Date of Receipt	
C. Mailing Address		M M / D D / Y Y Y Y	
City State Zip Code		Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		C	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

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

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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)

PAGE / OF /

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

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

NAME OF COMMITTEE (In Full)

NJCA PAE

Full Name (Last, First, Middle Initial)

A.

N/A

Mailing Address

Date of Disbursement

MM	DD	YYYY
----	----	------

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Amount

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

MM	DD	YYYY
----	----	------

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Amount

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

MM	DD	YYYY
----	----	------

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Amount

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

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

Amount

[Handwritten signature]

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SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 1 OF 1
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
NJCA PAC

LOAN SOURCE Full Name (Last, First, Middle Initial) **N/A**
 Mailing Address
 City State ZIP Code

Election:
 Primary
 General
 Other (specify) ▼

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS
 Date Incurred Date Due Interest Rate Secured:
 Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ▶ []
TOTALS This Period (last page in this line only) ▶ []

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

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SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
 NJCA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Nature of Debt (Purpose):
 Mailing Address
 City State Zip Code

N/A

Outstanding Balance Beginning This Period
 Amount Incurred This Period
 Payment This Period
 Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Nature of Debt (Purpose):
 Mailing Address
 City State Zip Code

Outstanding Balance Beginning This Period
 Amount Incurred This Period
 Payment This Period
 Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Nature of Debt (Purpose):
 Mailing Address
 City State Zip Code

Outstanding Balance Beginning This Period
 Amount Incurred This Period
 Payment This Period
 Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶
 2) TOTALS This Period (last page this line number only) ▶
 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶
 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

~~0~~

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
12/5/11

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



PREPARER
(3/2005)

12/13/11
DATE PREPARED

1103069366Z