

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Committee To Reelect Congressman Chris Smith

ADDRESS (number and street) **▼** P.O. Box 3184

Check if different than previously reported. (ACC)

Hamilton NJ 08619

2. **FEC IDENTIFICATION NUMBER** **▼** C00096412

CITY **▲** STATE **▲** ZIP CODE **▲** STATE **▼** DISTRICT

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

NJ 04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on 11 04 2008 in the State of NJ

5. Covering Period 10 16 2008 through 11 24 2008

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 Constance Carey

Signature of Treasurer Electronically Filed by Constance Carey Date 12 04 2008

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												<b>FEC FORM 3</b> (Revised 02/2003)
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	104963.59	893173.89
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	104963.59	892923.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	527064.37	913115.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	1524.51	1132.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	525539.86	911982.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	158566.10	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED  
SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Committee To Reelect Congressman Chris Smith

Report Covering the Period: From:    To:

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="04"/> <input type="text" value="2008"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="05"/> <input type="text" value="2008"/> (date after general election)  through <input type="text" value="11"/> <input type="text" value="24"/> <input type="text" value="2008"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (Use Schedule A)		
<input type="text" value="41387.00"/>	<input type="text" value="339780.71"/>	<input type="text" value="3356.00"/>
(ii) Unitemized		
<input type="text" value="49669.17"/>	<input type="text" value="339763.48"/>	<input type="text" value="14901.17"/>
(iii) Total of contributions from individuals		
<input type="text" value="91056.17"/>	<input type="text" value="661287.02"/>	<input type="text" value="18257.17"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="2800.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="13907.42"/>	<input type="text" value="229086.87"/>	<input type="text" value="22.50"/>

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
104963.59	893173.89	18279.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
1524.51	1132.84	1507.16
15. OTHER RECEIPTS (Dividends, Interest, etc)		
535.58	15836.92	251.28
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
107023.68	910143.65	20038.11

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Committee To Reelect Congressman Chris Smith

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
527064.37	913115.42	78832.09
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	250.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

0.00	250.00	0.00
------	--------	------

21. OTHER DISBURSEMENTS

0.00	24340.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

527064.37	937705.42	78832.09
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

104963.59	892923.89	18279.67
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

525539.86	911982.58	77324.93
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....	578606.79
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	107023.68
25. SUBTOTAL(add Line 23 and Line 24) .....	685630.47
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	527064.37
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	158566.10

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 131</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) George Adams</p> <p>Mailing Address 1014 36th Street</p> <p>City State Zip Code Orlando FL 32805-7124</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 81109.C41106</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">150.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	8												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Laurence Adams</p> <p>Mailing Address 12641 Sunbreak Way NE</p> <p>City State Zip Code Redmond WA 98053-5643</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer KBS Occupation Broadcast Sales</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  Primary 2010 <span style="border: 1px solid black; padding: 2px;">50.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 81109.C41217</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	7	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	7	/	2	0	0	8												

<p><b>C.</b> Full Name (Last, First, Middle Initial) William Allmann</p> <p>Mailing Address 624 Hyson Road</p> <p>City State Zip Code Jackson NJ 08527</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Sitton Septic Co Inc Occupation Installer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">1200.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table> </p> <p><b>Transaction ID:</b> 81031.C40832</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	3	1	/	2	0	0	8												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">700.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 68 Lillie Street

City State Zip Code  
Princeton Junction NJ 08550-1308

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt MM / DD / YYYY  
10 / 24 / 2008

**Transaction ID:** 81024.C40569

Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Donald Austin

Mailing Address 819 County Road 28

City State Zip Code  
South New Berlin NY 13843-2233

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Calif Dept & Forestry /Fire Pr Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 535.00

Date of Receipt MM / DD / YYYY  
11 / 02 / 2008

**Transaction ID:** 81102.C41001

Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 27 Corson Avenue

City State Zip Code  
Trenton NJ 08619

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Self Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt MM / DD / YYYY  
10 / 18 / 2008

**Transaction ID:** 81018.C40190

Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 600.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 341 Brandon Boulevard

City Freehold State NJ Zip Code 07728

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

Name of Employer CJM Group Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 02 / 2008  
**Transaction ID:** 81102.C41005  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Bausch

Mailing Address P.O. Box 1068

City Point Pleasant Bea State NJ Zip Code 08742-1068

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

Name of Employer Information Requested Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2008  
**Transaction ID:** 81031.C40820  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2514 Rutler St

City Bellmore State NY Zip Code 11710-3118

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2008  
**Transaction ID:** 81105.C41052  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Mary Lou Beyer

Mailing Address 48 Vienna Road

City State Zip Code  
Howell NJ 07731

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) Primary 2010  
 Election Cycle-to-Date 50.00

Date of Receipt

MM / DD / YYYY  
11 / 06 / 2008

Transaction ID: 81109.C41120

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Genevieve C. Bittner

Mailing Address 101 Fieldboro Drive

City State Zip Code  
Lawrenceville NJ 08648-3624

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 200.00

Date of Receipt

MM / DD / YYYY  
10 / 21 / 2008

Transaction ID: 81022.C40368

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Genevieve C. Bittner

Mailing Address 101 Fieldboro Drive

City State Zip Code  
Lawrenceville NJ 08648-3624

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 310.00

Date of Receipt

MM / DD / YYYY  
10 / 31 / 2008

Transaction ID: 81031.C40825

Amount of Each Receipt this Period

110.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

260.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Mary Boushor

Mailing Address 42 Ross Street

City State Zip Code  
Clark NJ 07066

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

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2008

Transaction ID: 81109.C41105

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Robert Bowe

Mailing Address 238 Warren St

City State Zip Code  
Gloucester City NJ 08030-1029

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

Name of Employer Retired

Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 31 / 2008

Transaction ID: 81031.C40819

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Robert Bowe

Mailing Address 238 Warren St

City State Zip Code  
Gloucester City NJ 08030-1029

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

Name of Employer Retired

Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
550.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2008

Transaction ID: 81105.C41020

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Josephine Brady  
Mailing Address 15 Stonehedge Ln.  
City Madison State NJ Zip Code 07940  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 01 / 2008  
Transaction ID: 81102.C40923  
Amount of Each Receipt this Period: 25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Retired  
Occupation: Retired  
Election Cycle-to-Date: 2008  
Receipt For:  Primary  General  Other (specify) ▼ Amount: 225.00

**B.** Full Name (Last, First, Middle Initial)  
David Brown  
Mailing Address 1313 Nottingham Way  
City Hamilton State NJ Zip Code 08609  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 23 / 2008  
Transaction ID: 81023.C40468  
Amount of Each Receipt this Period: 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Retired  
Occupation: Information Requested  
Election Cycle-to-Date: 2008  
Receipt For:  Primary  General  Other (specify) ▼ Amount: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Eileen Brown  
Mailing Address 107 Versailles Court  
City Hamilton State NJ Zip Code 08619  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 30 / 2008  
Transaction ID: 81030.C40790  
Amount of Each Receipt this Period: 60.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Retired  
Occupation: Retired  
Election Cycle-to-Date: 2008  
Receipt For:  Primary  General  Other (specify) ▼ Amount: 220.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mary Brown</p> <p>Mailing Address 62 Woodlawn Ave</p> <p>City State Zip Code Valley Stream NY 11581-1325</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  Primary 2010</p> <p style="text-align: right; margin-right: 50px;">50.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>                  11 / 11 / 2008</p> <p><b>Transaction ID:</b> 81111.C41585</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">50.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Maurice Brumbelow</p> <p>Mailing Address 727 Villard St</p> <p>City State Zip Code Cheney WA 99004-1253</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>                  10 / 21 / 2008</p> <p><b>Transaction ID:</b> 81022.C40422</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">200.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Richard Bruno</p> <p>Mailing Address P.O. Box 11</p> <p>City State Zip Code Piermont NY 10968-0011</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Self Contractor</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">300.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>                  11 / 04 / 2008</p> <p><b>Transaction ID:</b> 81105.C41038</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">350.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Susan Brunoff

Mailing Address 334 W Cedar St

City State Zip Code  
New Holland PA 17557-1202

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 665.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41074

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Josetta Burchardt

Mailing Address 1824 Wisteria Rd

City State Zip Code  
Rockford IL 61107

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

Name of Employer Occupation  
Information Requested Housewife

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81030.C40727

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
James Cameron

Mailing Address 1203 5th Avenue

City State Zip Code  
Spring Lake NJ 07762

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

Name of Employer Occupation  
Riverview Med Ctr Doctor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: 81019.C40286

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Angelo Candelori  
Mailing Address 31 Steward St.  
City State Zip Code  
Trenton NJ 08610-4831  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 8  
Transaction ID: 81105.C41049  
Amount of Each Receipt this Period  
100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary Cannon  
Mailing Address 6217 Lee Highway  
City State Zip Code  
Arlington VA 22205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Homemaker  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8  
Transaction ID: 81031.C40831  
Amount of Each Receipt this Period  
500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael Carnevale  
Mailing Address 103 Linden Lane  
City State Zip Code  
Princeton NJ 08540-3829  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Attorney  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8  
Transaction ID: 81030.C40792  
Amount of Each Receipt this Period  
250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Karen Caruso

Mailing Address 21 W 37th St

City State Zip Code  
Bayonne NJ 07002-2906

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

Name of Employer Occupation  
Stroock & Stroock secretary

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41044

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Eleanor Ciancimino

Mailing Address 73 Sunrise Court

City State Zip Code  
Lakewood NJ 08701

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 185.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C40391

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Eleanor Ciancimino

Mailing Address 73 Sunrise Court

City State Zip Code  
Lakewood NJ 08701

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 205.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 8

Transaction ID: 81102.C40936

Amount of Each Receipt this Period  
20.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

145.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 131  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 4461 Hill Avenue

City State Zip Code  
Bronx NY 10466-1135

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** 81105.C41065

Amount of Each Receipt this Period  
150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Helen Clair

Mailing Address 113 S Newport Avenue

City State Zip Code  
Ventnor City NJ 08406-2609

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

Name of Employer Information Requested Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** 81105.C41055

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1049 State Route 27

City State Zip Code  
Somerset NJ 08873-5014

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

Name of Employer M A Cleary Corp Occupation Exec

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 25.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 0 8

**Transaction ID:** 81109.C41264

Amount of Each Receipt this Period  
25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **275.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Frank Colbert

Mailing Address 44 Cedar Swamp Rd

City State Zip Code  
Jackson NJ 08527-4501

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

275.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2008

**Transaction ID:** 81031.C40821

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
George Coleman

Mailing Address 100 Newbury Ct Apt 305

City State Zip Code  
Concord MA 01742-4155

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

600.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 04 / 2008

**Transaction ID:** 81109.C41100

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
James Connelly

Mailing Address 241 S Summit Ave

City State Zip Code  
Villa Park IL 60181-2924

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation HS Teacher

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

350.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 04 / 2008

**Transaction ID:** 81109.C41093

Amount of Each Receipt this Period  
75.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 275.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 7327 Poplar Court

City Falls Church State VI Zip Code 22042

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

Name of Employer TIGHT PATTON ARMSTRONG TEASDAL  
Occupation Information Requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81116.C41975  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary Costello

Mailing Address 215 Hawksworth Road

City Greensburg State PA Zip Code 15601-1531

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

Name of Employer Information Requested  
Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 150.00

Date of Receipt 11 / 11 / 2008  
**Transaction ID:** 81111.C41598  
 Amount of Each Receipt this Period 150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 41 Mariner Place

City Brick State NJ Zip Code 08723

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

Name of Employer Information Requested  
Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2008  
**Transaction ID:** 81026.C40630  
 Amount of Each Receipt this Period 25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 24 Acacia Row

City State Zip Code  
Toms River NJ 08755-3214

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 6 / 2 0 0 8

**Transaction ID:** 81109.C41126

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Richard Creter

Mailing Address 24 Timberwick Drive

City State Zip Code  
Flemington NJ 08822

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

Name of Employer Creter Vault Company Occupation Business Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 4 / 2 0 0 8

**Transaction ID:** 81024.C40584

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 46 Taylor Terrace

City State Zip Code  
Hopewell NJ 08525

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 0 / 2 0 0 8

**Transaction ID:** 81022.C40328

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Carol Crossed

Mailing Address 1675 Clover Street

City State Zip Code  
Rochester NY 14618

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

Name of Employer Information Requested

Occupation Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Primary 2010

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 0 8

Transaction ID: 81109.C41341

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
John Crowley

Mailing Address 15 Leonard Court

City State Zip Code  
Princeton NJ 08540-7557

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

Name of Employer Information Requested  
Amicus Therapeutics

Occupation Information Requested  
CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C40689

Amount of Each Receipt this Period

2300.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Francis Culkin

Mailing Address 210 W Liberty St

City State Zip Code  
Rome NY 13440-5720

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

Name of Employer Information Requested

Occupation Information Requested  
Priest

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Primary 2010

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: 81109.C41139

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2850.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 209 Holiday Road

City State Zip Code  
Coralville IO 52241

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

Name of Employer Univ of Iowa Occupation Pharmacist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 50.00

Transaction ID: 81116.C41920

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mary Czillich

Mailing Address 134 Homestead Avenue

City State Zip Code  
Hamilton NJ 08610

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

Name of Employer Retired Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: 81022.C40366

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 134 Homestead Avenue

City State Zip Code  
Hamilton NJ 08610

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

Name of Employer Retired Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Transaction ID: 81109.C41144

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Patricia Demarest

Mailing Address 31 Boulevard

City State Zip Code  
Haskell NJ 07420-1112

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

Name of Employer Occupation  
Fair Lawn B.O.E. teacher

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 50.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: 81109.C41220

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Robert Destro

Mailing Address 2312 N. Powhatan Street

City State Zip Code  
Arlington VI 22205

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

Name of Employer Occupation  
Catholic University of America Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: 81116.C41992

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Eugene Diamond

Mailing Address 12109 S 87th Ave

City State Zip Code  
Palos Park IL 60464-1206

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

Name of Employer Occupation  
Information Requested Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 100.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 3 / 2 0 0 8

Transaction ID: 81124.C42046

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**400.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
James Donovan  
Mailing Address 1307 Kendal Way  
City State Zip Code  
Sleepy Hollow NY 10591-1061  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Primary 2010 50.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8  
Transaction ID: 81109.C41167  
Amount of Each Receipt this Period  
50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Margaret Dougherty  
Mailing Address 383 West Third St.  
City State Zip Code  
Florence NJ 08518  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Retired Nurse  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 650.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8  
Transaction ID: 81023.C40482  
Amount of Each Receipt this Period  
200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Carole Drabnis  
Mailing Address 5321 Foster Street  
City State Zip Code  
Piscataway NJ 08854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation  
Fabricland Sales  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 350.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8  
Transaction ID: 81105.C41060  
Amount of Each Receipt this Period  
100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **350.00**  
**TOTAL** This Period (last page this line number only) .....



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Rita Duenas	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 23 Empress Ct	<b>Transaction ID:</b> 81028.C40687
	City Freehold State NJ Zip Code 07728-4303	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Church & Dwight, INC Occupation Chemist Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Patrick Egan	Date of Receipt MM / DD / YYYY 10 / 26 / 2008
	Mailing Address 113A Pilatus Platz Unit A	<b>Transaction ID:</b> 81026.C40670
	City Freehold State NJ Zip Code 07728-3474	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Martin Ellbogen	Date of Receipt MM / DD / YYYY 11 / 11 / 2008
	Mailing Address 1042 S Durin St	<b>Transaction ID:</b> 81111.C41597
	City Casper State WY Zip Code 82601	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010 Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>225.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Ursula Erit

Mailing Address 2337 Crossing Way

City State Zip Code  
Wayne NJ 07470-4733

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010	Election Cycle-to-Date ▼ 40.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: 81109.C41158

Amount of Each Receipt this Period

40.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
David Farrell

Mailing Address 1707 Fox Trail

City State Zip Code  
Harker Heights TX 76548-7013

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

Name of Employer Retired	Occupation Information Requested
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 185.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: 81019.C40249

Amount of Each Receipt this Period

25.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
David Farrell

Mailing Address 1707 Fox Trail

City State Zip Code  
Harker Heights TX 76548-7013

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

Name of Employer Retired	Occupation Information Requested
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010	Election Cycle-to-Date ▼ 30.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 8

Transaction ID: 81111.C41576

Amount of Each Receipt this Period

30.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

95.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Jesus Ferro

Mailing Address 14 Evergreen Ln  
99 Jersey Ave

City State Zip Code  
Colts Neck NJ 07722-1276

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Ferro Industries Inc CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2008

**Transaction ID:** 81031.C40812

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
James Fitzgerald

Mailing Address 123 N 6th St

City State Zip Code  
Lindenhurst NY 11757-3735

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

**Transaction ID:** 81105.C41042

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Tim FitzMaurice

Mailing Address 335 Harper Avenue

City State Zip Code  
Brick NJ 08724

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Z2 Technologies Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** 81030.C40725

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Tim FitzMaurice

Mailing Address 335 Harper Avenue

City State Zip Code  
Brick NJ 08724

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

Name of Employer Occupation  
Z2 Technologies Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 **50.00**

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: 81109.C41134

Amount of Each Receipt this Period

**50.00**

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
Edward Flynn

Mailing Address 720 Old Hunt Way

City State Zip Code  
Herndon VI 10170

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

Name of Employer Occupation  
Praxis Resource Partners, llc Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **500.00**

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81116.C41963

Amount of Each Receipt this Period

**500.00**

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Barbara Fox

Mailing Address 113 Chicago Boulevard

City State Zip Code  
Sea Girt NJ 08750

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ **300.00**

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81030.C40735

Amount of Each Receipt this Period

**200.00**

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**750.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Jan Fredericks  
Mailing Address 64 Howedale Drive  
City Rochester State NY Zip Code 14616-1533  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 230.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C40579  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Jane Furlong  
Mailing Address 495-C Thornbury Court  
City Lakewood State NJ Zip Code 08701  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: 81023.C40461  
Amount of Each Receipt this Period 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jane Furlong  
Mailing Address 495-C Thornbury Court  
City Lakewood State NJ Zip Code 08701  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 30.00  
Date of Receipt 11 / 07 / 2008  
Transaction ID: 81109.C41241  
Amount of Each Receipt this Period 30.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 180.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 30 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Caroline Galbreath  
Mailing Address 1621 Yorktown Rd  
City Jamison State PE Zip Code 18929  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Imarax Pharmaceutical Corp. Occupation Pharm. Regulatory Affairs  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Primary 2010 200.00  
Date of Receipt 11 / 06 / 2008  
Transaction ID: 81116.C41884  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Caroline Galbreath  
Mailing Address 1621 Yorktown Rd  
City Jamison State PE Zip Code 18929  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Imarax Pharmaceutical Corp. Occupation Pharm. Regulatory Affairs  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Primary 2010 400.00  
Date of Receipt 11 / 06 / 2008  
Transaction ID: 81116.C41883  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Gallo  
Mailing Address 345 New Brunswick Avenue  
City East Brunswick State NJ Zip Code 08816  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify)  
250.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C40559  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **650.00**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 1806 Riverside Dr.

City State Zip Code  
Trenton NJ 08618

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

Name of Employer Mercer CCC Occupation College Administratr

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

**Transaction ID:** 81023.C40452

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gary Gordon

Mailing Address 149 Patriots Rd

City State Zip Code  
Morris Plains NJ 07950-1148

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

Name of Employer Retired Occupation Pharmacist (Retired)

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 81031.C40811

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 143 Dorchester Dr.

City State Zip Code  
East Windsor NJ 08520

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

Name of Employer KPMG Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

**Transaction ID:** 81023.C40462

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **250.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Peter Haas  
Mailing Address 143 Dorchester Dr.  
City East Windsor State NJ Zip Code 08520  
FEC ID number of contributing federal political committee. **C**  
Name of Employer KPMG Occupation Consultant  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 11 / 01 / 2008  
Transaction ID: 81102.C40839  
Amount of Each Receipt this Period 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Peter Hafner  
Mailing Address 218 12th Ave S  
City Onalaska State WI Zip Code 54650-3008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00  
Date of Receipt 11 / 02 / 2008  
Transaction ID: 81102.C40995  
Amount of Each Receipt this Period 40.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Syung Han  
Mailing Address 3411 Arnold Ln  
City Falls Church State VA Zip Code 22042-3505  
FEC ID number of contributing federal political committee. **C**  
Name of Employer S.D. Sunnyland Enterprises, In Occupation Consultant  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81109.C41098  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

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

FOR LINE NUMBER: PAGE 33 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Barbara Henkels  
Mailing Address 345 Stenton Avenue  
City Plymouth Meeting State PA Zip Code 19462  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C40586  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Paul Henkels  
Mailing Address 345 Stenton Avenue  
City Plymouth Meeting State PA Zip Code 19462  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Henkels & McCoy Occupation Chairman  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C40585  
Amount of Each Receipt this Period 1500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Marie Hess  
Mailing Address 74 Humphrey Dr  
City Syosset State NY Zip Code 11791-4025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81105.C41071  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2700.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 100 Van Doren Avenue

City State Zip Code  
Chatham NJ 07928

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

Name of Employer Occupation  
Swiss RE Financial Services

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period: 50.00

Transaction ID: 81102.C40853

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Hieu Ho

Mailing Address 1930 3rd Avenue N.

City State Zip Code  
Minneapolis MN 55405

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

Name of Employer Occupation  
Banyon Data Systems Programmer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼  
 Primary 2010

Amount of Each Receipt this Period: 50.00

Transaction ID: 81116.C41872

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address P.O. Box 105

City State Zip Code  
Cream Ridge NE 8514

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: 81116.C42007

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Dave Horsnall

Mailing Address P.O. Box 105

City State Zip Code  
Cream Ridge NE 8514

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81116.C42006

Amount of Each Receipt this Period

200.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Catherine Hubeny

Mailing Address 2000 E. Chicago Ave. Ste. 200

City State Zip Code  
Westmont IL 60559

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
None

Occupation  
Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81116.C41906

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Hurley

Mailing Address 374 Holly Ave

City State Zip Code  
Bay Head NJ 08742-5031

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81031.C40822

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)

Nancy Iredale

Mailing Address 515 S. Flower Street

City State Zip Code  
Los Angeles CA 90071

FEC ID number of contributing federal political committee.

C

Name of Employer  
Paul Hastings

Occupation  
Tax Atty

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81116.C41946

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Robert Jaminet

Mailing Address 6531 Five Mile Point Rd

City State Zip Code  
Allouez MI 49805-6966

FEC ID number of contributing federal political committee.

C

Name of Employer  
St Claire Regional Medical Cen

Occupation  
Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Primary 2010

Election Cycle-to-Date ▼  
50.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: 81109.C41214

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Ursula Johnson

Mailing Address 27 Redhill Road

City State Zip Code  
Manchester NJ 08759

FEC ID number of contributing federal political committee.

C

Name of Employer  
Retired

Occupation  
Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
375.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40472

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1100.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 131  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Richard Joyce

Mailing Address 35 Preston Dr

City State Zip Code  
Gillette NJ 07933-1422

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

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
205.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2008

Transaction ID: 81102.C40930

Amount of Each Receipt this Period  
20.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Frank Juranic

Mailing Address 425 Sandalwood Ave.

City State Zip Code  
Trenton NJ 08619

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

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
300.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2008

Transaction ID: 81019.C40265

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
John Keane

Mailing Address 33 Ellsworth Ave

City State Zip Code  
Staten Island NY 10312-2501

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

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Amount of Each Receipt this Period  
900.00

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

Transaction ID: 81105.C41061

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **220.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 131  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Kelly-Singer

Mailing Address 9 Sugarwood Way

City Warren State NJ Zip Code 07059-6792

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

Name of Employer Self Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 525.00

Date of Receipt 11 / 04 / 2008

Transaction ID: 81105.C41058

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Stephen Kempf

Mailing Address 1561 Silverton Road

City Toms River State NJ Zip Code 08755

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

Name of Employer FEMA Occupation Regional Administrator

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt 11 / 04 / 2008

Transaction ID: 81105.C41066

Amount of Each Receipt this Period 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mary Jane Kenny

Mailing Address 5 Pine Hollow

City Bernardsville State NJ Zip Code 07924

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

Name of Employer Information Requested Occupation Homemaker

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2008

Transaction ID: 81023.C40483

Amount of Each Receipt this Period 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 131  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Mary Jane Kenny

Mailing Address 5 Pine Hollow

City State Zip Code  
Bernardsville NJ 07924

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

Name of Employer Information Requested Occupation  
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

Transaction ID: 81105.C41070

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
George Keyes

Mailing Address 779 Tree Ln

City State Zip Code  
West Chester PA 19380-2001

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

Name of Employer Information Requested Occupation  
Retired Manager

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2008

Transaction ID: 81024.C40578

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 14 Curtis Avenue

City State Zip Code  
Manasquan NJ 08736

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

Name of Employer Information Requested Occupation  
Monmouth Cnty R.N.

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: 81023.C40475

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **350.00**

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

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

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

FOR LINE NUMBER: PAGE 40 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Marie Kile  
Mailing Address 14 Curtis Avenue  
City Manasquan State NJ Zip Code 08736  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Monmouth Cnty Occupation R.N.  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼ Primary 2010  
Election Cycle-to-Date ▼ 50.00  
Date of Receipt 11 / 06 / 2008  
Transaction ID: 81109.C41125  
Amount of Each Receipt this Period 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kyu Sang Kim  
Mailing Address 6 Brianna Court  
City Hamilton State NJ Zip Code 08619  
FEC ID number of contributing federal political committee. **C**  
Name of Employer University Shoe & Luggage Occupation Shoemaker  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 600.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: 81022.C40370  
Amount of Each Receipt this Period 300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
G. Allen Kingston  
Mailing Address 5226 Ballona Lane  
City Culver City State CA Zip Code 90230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Natl Comm Renaissance Corp Occupation Vice Chairman  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: 81023.C40455  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**  
**TOTAL** This Period (last page this line number only) ..... ▶



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Mary Klink  
Mailing Address 1010 Cima Linda Lane  
City Santa Barbara State CA Zip Code 93108  
FEC ID number of contributing federal political committee. C

Date of Receipt MM / DD / YYYY  
11 / 03 / 2008  
**Transaction ID:** 81116.C41886  
Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Self Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ Primary 2010 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Betty Knight  
Mailing Address 5201 Catalina Rd  
City Knoxville State TN Zip Code 37918-4510  
FEC ID number of contributing federal political committee. C

Date of Receipt MM / DD / YYYY  
11 / 04 / 2008  
**Transaction ID:** 81109.C41096  
Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 480.00

**C.** Full Name (Last, First, Middle Initial)  
Charles Lazure  
Mailing Address 2725 N 45th Ave  
City Omaha State NE Zip Code 68104-4526  
FEC ID number of contributing federal political committee. C

Date of Receipt MM / DD / YYYY  
11 / 07 / 2008  
**Transaction ID:** 81109.C41188  
Amount of Each Receipt this Period 35.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ Primary 2010 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1135.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Kha Le  
Mailing Address 608 W. Mariposa Street  
City Chandler State AZ Zip Code 85225  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Unemployed Occupation Engineer  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 340.00  
Date of Receipt 10 / 18 / 2008  
Transaction ID: 81018.C40173  
Amount of Each Receipt this Period 30.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sinh Tuyet Le  
Mailing Address 171 Moyallen Street  
City Wilkes Barre State PA Zip Code 18702-4852  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C40581  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Nathan Lindenbaum  
Mailing Address 464 Winthrop Road  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Etzioni Partners Occupation Marketer  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: 81031.C40837  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1130.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Joseph Loozen

Mailing Address 16 Hillcrest Ln

City State Zip Code  
High Bridge NJ 08829-1306

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

Name of Employer Occupation  
Malick & Scgerer Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 25.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 9 / 2 0 0 8

Transaction ID: 81109.C41422

Amount of Each Receipt this Period

25.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Phuong Luc

Mailing Address 6 Fairdale Court

City State Zip Code  
Silver Spring MD 20905

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 40.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 7 / 2 0 0 8

Transaction ID: 81109.C41159

Amount of Each Receipt this Period

40.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

David Lucas

Mailing Address 9509 Sandy Court

City State Zip Code  
Manassas VA 20110

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

Name of Employer Occupation  
MRJ Technology Solutions Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41028

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

165.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Chris Lupia

Mailing Address 32 Beaver Dam Road

City State Zip Code  
Colts Neck NJ 07722

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C40703

Amount of Each Receipt this Period

200.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Edward Lyons

Mailing Address 1417 Durham Avenue

City State Zip Code  
South Plainfield NJ 07080

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

Name of Employer Occupation  
Pfizer, Inc. Assoc. Director Reg. Affairs

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41076

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
David Maier

Mailing Address 50201 Delaire Landing Rd

City State Zip Code  
Philadelphia PA 19114-5332

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ Primary 2010 50.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: 81109.C41121

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
William Marino

Mailing Address 6 Cobblestone Ln

City State Zip Code  
Morristown NJ 07960-6424

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

Name of Employer  
Horizon Blue Cross Blue Shield

Occupation  
President & CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2008

Transaction ID: 81109.C41147

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Lloyd Martinson

Mailing Address 4 Carriage Way

City State Zip Code  
Basking Ridge NE 7920

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

Name of Employer  
Precision System Design, Inc.

Occupation  
Information Requested

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 18 / 2008

Transaction ID: 81116.C42018

Amount of Each Receipt this Period

350.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
William McCarthy

Mailing Address 46 Cranbury Rd

City State Zip Code  
Princeton Junction NJ 08550-1231

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

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2008

Transaction ID: 81109.C41099

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Mary Jo McDermott  
Mailing Address 4 Coddington Lane  
City State Zip Code  
Califon NJ 07830  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2500.00  
Date of Receipt M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8  
**Transaction ID:** 81105.C41015  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John McGrath  
Mailing Address 905 Tudor Drive  
City State Zip Code  
Toms River NJ 08753-7903  
FEC ID number of contributing federal political committee. C  
Name of Employer Information Requested Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8  
**Transaction ID:** 81030.C40731  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Helen McHugh  
Mailing Address 31 Oliver St  
City State Zip Code  
Chatham NJ 07928-2322  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8  
**Transaction ID:** 81105.C41059  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 700.00  
**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 47 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Joseph McLaughlin  
Mailing Address 12 Colonial Ln  
City Riverside State CT Zip Code 06878-2301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: 81116.C41601  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Eileen Meagher  
Mailing Address 2 Alyce Ct  
City Trenton State NJ Zip Code 08648-3116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1080.00  
Date of Receipt 11 / 01 / 2008  
Transaction ID: 81102.C40848  
Amount of Each Receipt this Period 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth Meagher  
Mailing Address 2 Alyce Court  
City Lawrenceville State NJ Zip Code 08648-3116  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Incarnation Chr Occupation teacher  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 10 / 18 / 2008  
Transaction ID: 81018.C40189  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 48 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Cecile Meunier  
Mailing Address 462 Main St Apt 212  
City Agawam State MA Zip Code 01001-1833  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 21 / 2008  
Transaction ID: 81022.C40419  
Amount of Each Receipt this Period: 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Occupation Information Requested  
Receipt For: 2008  
 Primary    General    Other (specify) ▼  
Election Cycle-to-Date ▼: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Makram Michail  
Mailing Address 8 Freedom Court  
City Howell State NJ Zip Code 07731  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 02 / 2008  
Transaction ID: 81102.C41004  
Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Occupation Information Requested  
Receipt For: 2008  
 Primary    General    Other (specify) ▼  
Election Cycle-to-Date ▼: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Harold Milnes  
Mailing Address 3914 Vineland Ave  
City Baldwin Park State CA Zip Code 91706-4338  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 10 / 23 / 2008  
Transaction ID: 81023.C40536  
Amount of Each Receipt this Period: 75.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Occupation Information Requested  
Receipt For: 2008  
 Primary    General    Other (specify) ▼  
Election Cycle-to-Date ▼: 175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1125.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 49 / 131</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Harold Milnes</p> <p>Mailing Address 3914 Vineland Ave</p> <p>City State Zip Code Baldwin Park CA 91706-4338</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 04 / 2008</p> <p><b>Transaction ID:</b> 81105.C41025</p> <p>Amount of Each Receipt this Period 75.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Joseph Moore</p> <p>Mailing Address PO Box 5132</p> <p>City State Zip Code Sun City West AZ 85376-5132</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">800.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 04 / 2008</p> <p><b>Transaction ID:</b> 81105.C41067</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Dennis Morrissy</p> <p>Mailing Address 272 King Street</p> <p>City State Zip Code Crystal Lake IL 60014</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Information Requested Occupation Diocese of Rockford Priest</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010</p> <p style="text-align: right;">100.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 16 / 2008</p> <p><b>Transaction ID:</b> 81116.C41878</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Mulligan		Date of Receipt MM / DD / YYYY 11 / 16 / 2008		
	Mailing Address PO Box 906		<b>Transaction ID:</b> 81116.C41879		
	City Farmingdale	State NJ	Zip Code 07727	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CBIP Management	Occupation President	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2010		

<b>B.</b>	Full Name (Last, First, Middle Initial) Elaine Murhammer		Date of Receipt MM / DD / YYYY 11 / 04 / 2008		
	Mailing Address 4112 Jefferson Hwy Apt 320		<b>Transaction ID:</b> 81109.C41104		
	City New Orleans	State LA	Zip Code 70121-4408	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Retired	Occupation Retired	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>C.</b>	Full Name (Last, First, Middle Initial) John Murphy		Date of Receipt MM / DD / YYYY 11 / 08 / 2008		
	Mailing Address 42 Walchenbach Cir		<b>Transaction ID:</b> 81109.C41316		
	City Pittsfield	State MA	Zip Code 01201-9113	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Primary 2010		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>625.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Theodore Narozanick

Mailing Address 23 Brinkerhoff Avenue

City State Zip Code  
Freehold NJ 07728-2004

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

Transaction ID: 81019.C40264

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Louis Natale, Jr.

Mailing Address 4 Bedford Dr.

City State Zip Code  
Trenton NJ 08628

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

Name of Employer Occupation  
Ritchie & Page Dist. Co., Inc. President

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40484

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Leonard Nesterak

Mailing Address 16 W High St

City State Zip Code  
Coaldale PA 18218-1418

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

Name of Employer Occupation  
Information Requested Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ Primary 2010 25.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 0 8

Transaction ID: 81109.C41268

Amount of Each Receipt this Period

25.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**375.00**

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

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

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

FOR LINE NUMBER: PAGE 52 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
June Newman  
Mailing Address 4 Birchwood Dr  
City Pittsgrove State NJ Zip Code 08318-5620  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **225.00**  
Date of Receipt 11 / 01 / 2008  
Transaction ID: 81102.C40952  
Amount of Each Receipt this Period 25.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Tien Nguyen  
Mailing Address 4368 N. Pershing Dr.  
City Arlington State VI Zip Code 22203  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Engineer  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **220.00**  
Date of Receipt 10 / 18 / 2008  
Transaction ID: 81116.C41956  
Amount of Each Receipt this Period 30.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Tien Nguyen  
Mailing Address 4368 N. Pershing Dr.  
City Arlington State VI Zip Code 22203  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Engineer  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **245.00**  
Date of Receipt 10 / 30 / 2008  
Transaction ID: 81116.C41955  
Amount of Each Receipt this Period 25.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) **80.00**  
**TOTAL** This Period (last page this line number only)

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Mary Elizabeth Noll

Mailing Address 66 Franklin Rd

City State Zip Code  
Denville NJ 07834-1557

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 240.00

Date of Receipt MM / DD / YYYY  
11 / 01 / 2008

**Transaction ID:** 81102.C40842

Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
John OBrien

Mailing Address 10933 SW 89th Ave

City State Zip Code  
Ocala FL 34481-9722

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** 81030.C40730

Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
John ONeill

Mailing Address 13 Yorktowne Drive

City State Zip Code  
Manalapan NJ 07726

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation  
Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt MM / DD / YYYY  
10 / 18 / 2008

**Transaction ID:** 81018.C40186

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 200.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
John O'Neill

Mailing Address 13 Yorktowne Drive

City State Zip Code  
Manalapan NJ 07726

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

**Transaction ID:** 81105.C41041

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Teresa OToole

Mailing Address 2718 Sims Ave.

City State Zip Code  
St. Louis MO 63114

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

300.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2008

**Transaction ID:** 81023.C40454

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 75 South Boulevard

City State Zip Code  
Spring Lake NJ 07762

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

350.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2008

**Transaction ID:** 81023.C40453

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)

Harry Paalberg, Jr.

Mailing Address 1547 Logan Drive

City State Zip Code  
Manasquan NJ 08736-2507

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

Name of Employer Occupation  
Boeing Co. Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41064

Amount of Each Receipt this Period

150.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Michael Pauley

Mailing Address 6219 NE 196th Street

City State Zip Code  
Kenmore WA 98028

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

Name of Employer Occupation  
Self Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 0 8

Transaction ID: 81116.C42036

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Ralph Perez

Mailing Address 5 Kansas Drive

City State Zip Code  
Jackson NJ 08527-1515

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81109.C41143

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Maurice Perilli

Mailing Address 7 Meadowlark Drive

City State Zip Code  
Hamilton Square NJ 08690

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Roma Savings Bank Officer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2008

**Transaction ID:** 81022.C40365

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Susan Piening

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2008

**Transaction ID:** 81031.C40830

Amount of Each Receipt this Period  
250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mark Pilla

Mailing Address 1 Log Road

City State Zip Code  
Tabernacle NJ 08088-9730

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
St. Barnabas Health Care System Hospital Administrator

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 100.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 23 / 2008

**Transaction ID:** 81023.C40478

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 450.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark Pilla	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 1 Log Road	<b>Transaction ID:</b> 81024.C40582
	City State Zip Code Tabernacle NJ 08088-9730	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer St. Barnabas Health Care System	Occupation Hospital Administrator	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Pinzolo	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 8 Bahia Court	<b>Transaction ID:</b> 81023.C40479
	City State Zip Code Brick NJ 08723-7627	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Monica Pollich	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 1046 Chambers St	<b>Transaction ID:</b> 81023.C40450
	City State Zip Code Trenton NJ 08611-3710	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Rider Univ	Occupation Applications Mgr	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>325.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 58 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Catherine Potash  
Mailing Address 5 Woodland Court  
City State Zip Code  
Trenton NJ 08610-2724  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
St. Lawrence Rehab Counselor  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 8  
Transaction ID: 81102.C40869  
Amount of Each Receipt this Period  
50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Arthur Potter  
Mailing Address 717 Wall Road  
City State Zip Code  
Spring Lake NJ 07762-2264  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8  
Transaction ID: 81022.C40327  
Amount of Each Receipt this Period  
100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Robert Prata  
Mailing Address 60 Andover Ln  
City State Zip Code  
Matawan NJ 07747-1229  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Retired Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 8  
Transaction ID: 81102.C40868  
Amount of Each Receipt this Period  
50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 200.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 131  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 400 Lexington Ave

City State Zip Code  
Toms River NJ 08753-7749

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

Name of Employer Information Requested Occupation  
Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 8

**Transaction ID:** 81102.C40847

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Donald Ranft

Mailing Address 611 Glen Road

City State Zip Code  
Hershey PE 17033

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

Name of Employer Information Requested Occupation  
Collen IP Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 8

**Transaction ID:** 81019.C40257

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 611 Glen Road

City State Zip Code  
Hershey PE 17033

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

Name of Employer Information Requested Occupation  
Collen IP Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 81116.C41918

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Max Rauscher

Mailing Address 380 Harper Avenue

City State Zip Code  
Brick NJ 08724

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41018

Amount of Each Receipt this Period

50.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Manuel Rebelo

Mailing Address 22 Hudson View Drive

City State Zip Code  
Yonkers NY 10701

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

Name of Employer Occupation  
BDD Seidman LLP Public Accountant

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81109.C41146

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Katherine Redlich

Mailing Address 222 Bartley Road

City State Zip Code  
Jackson NJ 08527

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

Name of Employer Occupation  
Retired Broker

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41079

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 300 East Main Street

City Middletown State MA Zip Code 21769

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

Name of Employer Polos Ltd Occupation Homemaker

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 10 / 30 / 2008  
**Transaction ID:** 81116.C41925  
 Amount of Each Receipt this Period 150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Roche

Mailing Address 7 Summit Road, Box 137

City Brookside State NJ Zip Code 07926

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

Name of Employer Information Requested Occupation HM

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 50.00

Date of Receipt 11 / 06 / 2008  
**Transaction ID:** 81109.C41132  
 Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1680 Route 23, Suite 140  
PO Box 407

City Wayne State NJ Zip Code 07470

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

Name of Employer Robert A. Roe Assoc Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2008  
**Transaction ID:** 81031.C40833  
 Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

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

FOR LINE NUMBER: PAGE 62 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
John Ross  
 Mailing Address 165 Palisade Drive  
 City State Zip Code  
 Freehold NJ 07728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Atty  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Amount: 380.00  
 Date of Receipt: 10 / 23 / 2008  
**Transaction ID:** 81023.C40526  
 Amount of Each Receipt this Period: 30.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Rue  
 Mailing Address 33 Cranbury Neck Rd.  
 City State Zip Code  
 Cranbury NJ 08512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rue Insurance Occupation President  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Amount: 2250.00  
 Date of Receipt: 11 / 04 / 2008  
**Transaction ID:** 81105.C41075  
 Amount of Each Receipt this Period: 250.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
J. R. Sanchez  
 Mailing Address 5130 - 26th Street N  
 City State Zip Code  
 Arlington VA 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer USDA Occupation Attorney  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) Amount: 2001.00  
 Date of Receipt: 11 / 02 / 2008  
**Transaction ID:** 81102.C41003  
 Amount of Each Receipt this Period: 501.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **781.00**  
**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 63 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 2820 Butler Bay Drive N.

City State Zip Code  
Windermere FL 34786

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 8

**Transaction ID:** 81102.C41002

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Adelaide Sangiorgi

Mailing Address PO Box 758

City State Zip Code  
Spring Lake NJ 07762-0758

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** 81105.C41026

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 331 N Ridgewood Rd

City State Zip Code  
South Orange NJ 07079-1621

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 8

**Transaction ID:** 81102.C40844

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

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

FOR LINE NUMBER: PAGE 64 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Rita Savage  
Mailing Address 1609 Randolph Way  
City Wall Township State NJ Zip Code 07719-4717  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 04 / 2008  
Transaction ID: 81105.C41024  
Amount of Each Receipt this Period: 70.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Occupation Information Requested  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 255.00

**B.** Full Name (Last, First, Middle Initial)  
Rita Savage  
Mailing Address 1609 Randolph Way  
City Wall Township State NJ Zip Code 07719-4717  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 06 / 2008  
Transaction ID: 81109.C41112  
Amount of Each Receipt this Period: 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Information Requested: Occupation Information Requested  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼ Primary 2010 Election Cycle-to-Date ▼ 50.00

**C.** Full Name (Last, First, Middle Initial)  
William Scheerer  
Mailing Address 63 Devonshire Dr  
City Morganville State NJ Zip Code 07751-1153  
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 11 / 01 / 2008  
Transaction ID: 81102.C40841  
Amount of Each Receipt this Period: 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Name of Employer Retired: Occupation Consultant  
Receipt For: 2008  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **170.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 131
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) David Schlussek	Date of Receipt MM / DD / YYYY 10 / 31 / 2008
	Mailing Address 153 Fort Lee Road	<b>Transaction ID:</b> 81031.C40836
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Key Properties LLC Real Estate	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Schroeder	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 35 Brynmomre Road	<b>Transaction ID:</b> 81022.C40360
	City State Zip Code New Egypt NJ 08533	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Retired Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 230.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Shaffer	Date of Receipt MM / DD / YYYY 11 / 23 / 2008
	Mailing Address 134 La Fortuna	<b>Transaction ID:</b> 81124.C42049
	City State Zip Code Newbury Park CA 91320-1012	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Information Requested Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010	Election Cycle-to-Date ▼ 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 1179 Log College Dr

City Warminster State PA Zip Code 18974-1866

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

Name of Employer Information Requested Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 36.00

Date of Receipt 11 / 07 / 2008  
**Transaction ID:** 81109.C41157  
 Amount of Each Receipt this Period 36.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Paulette Shalhoub

Mailing Address 39 Galloping Hill Rd

City Holmdel State NJ Zip Code 07733-1818

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 50.00

Date of Receipt 11 / 07 / 2008  
**Transaction ID:** 81109.C41173  
 Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 9325 Sibelius Dr

City Vienna State VA Zip Code 22182-1632

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

Name of Employer NA Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 50.00

Date of Receipt 11 / 06 / 2008  
**Transaction ID:** 81109.C41135  
 Amount of Each Receipt this Period 50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **136.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 117 Derby Drive

City Elverson State PA Zip Code 19520-9706

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

Name of Employer Presbyterian Church Occupation Clergyman (retired)

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 25.00

Date of Receipt 11 / 08 / 2008  
**Transaction ID:** 81109.C41274  
 Amount of Each Receipt this Period 25.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 809

City Freehold State NJ Zip Code 07728

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 100.00

Date of Receipt 11 / 11 / 2008  
**Transaction ID:** 81111.C41593  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4445 W 215th St

City Fairview Park State OH Zip Code 44126-2301

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

Name of Employer Information Requested Occupation Ret.

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼ 20.00

Date of Receipt 11 / 10 / 2008  
**Transaction ID:** 81111.C41569  
 Amount of Each Receipt this Period 20.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 131

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth Skapin

Mailing Address 4445 W 215th St

City State Zip Code  
Fairview Park OH 44126-2301

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

Name of Employer Information Requested Occupation Ret.  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 40.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 1 / 2 0 0 8

Transaction ID: 81116.C41728

Amount of Each Receipt this Period  
20.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Antonine Slade

Mailing Address PO Box 16

City State Zip Code  
Marlboro NJ 07746-0016

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

Name of Employer Information Requested Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 365.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81030.C40788

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
John Sommer

Mailing Address 172 Forest Ave

City State Zip Code  
Verona NJ 07044-1018

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

Name of Employer Information Requested Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81031.C40817

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

170.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 620 E Arch St

City Palmyra State PA Zip Code 17078-1805

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

Name of Employer Information Requested Occupation Ret

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 100.00

Transaction ID: 81105.C41039

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Richard Stith

Mailing Address 812 Brown Street

City Valparaiso State IN Zip Code 46383

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

Name of Employer Valparaiso University Occupation Professor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 500.00

Transaction ID: 81022.C40428

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 97 Hobart Ave

City Absecon State NJ Zip Code 08201-1136

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

Name of Employer Retired Occupation Clergy

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 50.00

Transaction ID: 81102.C40855

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 70 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Ada Strassenburgh  
Mailing Address PO Box 608  
City State Zip Code  
Ocean View NJ 08230-0608  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 650.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81105.C41037  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Z. Strzalkowski  
Mailing Address 6 Dandelion Dr  
City State Zip Code  
Boiling Springs PA 17007-9735  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1010.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: 81109.C41148  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ghulam Suhrawardi  
Mailing Address 155 Mercer Road  
City State Zip Code  
Colts Neck NJ 07722  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NMCI Group Occupation CEO  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: 81030.C40728  
Amount of Each Receipt this Period 50.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Mary Sullivan

Mailing Address 44 Lunn Ave

City State Zip Code  
Bergenfield NJ 07621-2539

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

Name of Employer Information Requested	Occupation Retired
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary 2010	Election Cycle-to-Date ▼ 25.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 8 / 2 0 0 8

Transaction ID: 81109.C41276

Amount of Each Receipt this Period

25.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mary Sundy

Mailing Address 45 Fordyce Manor Ct

City State Zip Code  
Lake Saint Louis MO 63367-1800

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

Name of Employer Self	Occupation Homemaker
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81109.C41141

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen Sweeney

Mailing Address 879 N Lexington St

City State Zip Code  
Arlington VA 22205-1332

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

Name of Employer Information Requested	Occupation Information Requested
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81109.C41095

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

225.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) John Torney	Date of Receipt MM / DD / YYYY 11 / 01 / 2008
	Mailing Address 5 Dellwood Ln	<b>Transaction ID:</b> 81102.C40901
	City Somerset State NJ Zip Code 08873-1551	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Clergy Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dominic Toscani	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 700 Hobbs Road	<b>Transaction ID:</b> 81105.C41077
	City Wayne State PA Zip Code 19087	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Trinko	Date of Receipt MM / DD / YYYY 10 / 24 / 2008
	Mailing Address 4706 Jaques Ct.	<b>Transaction ID:</b> 81116.C41998
	City Fremont State CA Zip Code 94555	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Information Requested Occupation Physicist Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>525.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 131  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Caroline Trostel</p> <p>Mailing Address 50 Lacey Road, #F-234</p> <p>City State Zip Code Whiting NJ 08759</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Retired Occupation Information Requested</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">215.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID:</b> 81022.C40369</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">115.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
M M / D D / Y Y Y Y			
1 0 / 2 1 / 2 0 0 8			

<p><b>B.</b> Full Name (Last, First, Middle Initial) David Turp</p> <p>Mailing Address 675 Yardville-Allentown Rd.</p> <p>City State Zip Code Yardville NJ 08620</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">270.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 2 1 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID:</b> 81022.C40364</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">80.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 0 / 2 1 / 2 0 0 8
M M / D D / Y Y Y Y			
1 0 / 2 1 / 2 0 0 8			

<p><b>C.</b> Full Name (Last, First, Middle Initial) David Turp</p> <p>Mailing Address 675 Yardville-Allentown Rd.</p> <p>City State Zip Code Yardville NJ 08620</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested Occupation Retired</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                  Primary 2010</p> <p>Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">30.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 1 / 0 7 / 2 0 0 8</td> </tr> </table> </p> <p><b>Transaction ID:</b> 81109.C41235</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M / D D / Y Y Y Y	1 1 / 0 7 / 2 0 0 8
M M / D D / Y Y Y Y			
1 1 / 0 7 / 2 0 0 8			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">225.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Clifford Tyler

Mailing Address 106 Worthington  
PO Box 72

City State Zip Code  
Spring Lake NJ 07762

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 625.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 27 / 2008

**Transaction ID:** 81028.C40684

Amount of Each Receipt this Period 125.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Eugene Vater

Mailing Address 250 Grant Avenue, B23

City State Zip Code  
Lyndhurst NJ 07071

FEC ID number of contributing federal political committee. C

Name of Employer Schering-Plough Research Insti Occupation Chemist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 31 / 2008

**Transaction ID:** 81031.C40818

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Bau Vu

Mailing Address 32 Swan Ave.

City State Zip Code  
East Boston MA 2128

FEC ID number of contributing federal political committee. C

Name of Employer Massachusetts General Hos- Occupation Information Requested  
pital

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 100.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 18 / 2008

**Transaction ID:** 81116.C41935

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 325.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bau Vu</p> <p>Mailing Address 32 Swan Ave.</p> <p>City State Zip Code East Boston MA 2128</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Massachusetts General Hospital</p> <p>Occupation Information Requested</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 3 0 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81116.C41934</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">200.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Maureen Walsh</p> <p>Mailing Address 1801 Brooktrail Court</p> <p>City State Zip Code Vienna VI 22182</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 3 0 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81116.C41923</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) John Weir</p> <p>Mailing Address 85 Park Edge</p> <p>City State Zip Code Berkeley Heights NJ 07922-1282</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested</p> <p>Occupation Retired</p> <p>Receipt For: 2008  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼          Primary 2010</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 1 / 1 1 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 81111.C41596</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt  <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">550.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Nan Wells

Mailing Address 5057 Overlook Road, NW

City	State	Zip Code
Washington	D.	20016

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

Name of Employer Self	Occupation Higher Ed Consultant
--------------------------	------------------------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: 81116.C41966

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
George Welsh

Mailing Address 15 Cross St

City	State	Zip Code
Williston Park	NY	11596-1845

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

Name of Employer NHyde Park Schs	Occupation Custodian
-------------------------------------	-------------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41030

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Roy Wesley

Mailing Address 25 Spruce Street

City	State	Zip Code
Princeton Junction	NJ	08550

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

Name of Employer American Reinsurance	Occupation Reinsurance
--	---------------------------

Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 8

Transaction ID: 81102.C41000

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Francis Whitesell

Mailing Address 3513 NE 47th St

City State Zip Code  
Kansas City MO 64117-1239

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ Primary 2010 25.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 9 / 2 0 0 8

Transaction ID: 81109.C41448

Amount of Each Receipt this Period

25.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Albert Woodring

Mailing Address 43 Granville Way

City State Zip Code  
Exton PA 19341-2786

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

Name of Employer Occupation  
Self Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: 81022.C40420

Amount of Each Receipt this Period

100.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Albert Woodring

Mailing Address 43 Granville Way

City State Zip Code  
Exton PA 19341-2786

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

Name of Employer Occupation  
Self Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: 81105.C41078

Amount of Each Receipt this Period

500.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**625.00**

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

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

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

FOR LINE NUMBER: PAGE 78 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
Robert Wormald  
Mailing Address 10121 Chapel Road  
City Potomac State MD Zip Code 20854  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Home Builder  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt MM / DD / YYYY  
10 / 31 / 2008  
Transaction ID: 81031.C40827  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Anne Wunsche  
Mailing Address 261 E Line St Apt G  
City Bishop State CA Zip Code 93514-3551  
FEC ID number of contributing federal political committee. C  
Name of Employer Retired Occupation Ret  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 670.00  
Date of Receipt MM / DD / YYYY  
11 / 04 / 2008  
Transaction ID: 81109.C41107  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Walter Wynkoop  
Mailing Address 76 Kettle Creek Drive  
City Brick State NE Zip Code 8723  
FEC ID number of contributing federal political committee. C  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt MM / DD / YYYY  
10 / 16 / 2008  
Transaction ID: 81116.C42034  
Amount of Each Receipt this Period 250.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 700.00  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Maggie Wynne

Mailing Address 1607 N. Jefferson Street

City State Zip Code  
Arlington VA 22205

FEC ID number of contributing federal political committee. C

Name of Employer Federal Government Occupation Analyst

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** 81022.C40346

Amount of Each Receipt this Period 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Harriet Young

Mailing Address 81910 Arus Ave

City State Zip Code  
Indio CA 92201-7739

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** 81022.C40421

Amount of Each Receipt this Period 150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Marion Zarzeczna

Mailing Address 500 Centre Street

City State Zip Code  
Trenton NJ 08611-3018

FEC ID number of contributing federal political committee. C

Name of Employer Curtis Institute Occupation Piano Teacher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** 81031.C40823

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 500.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 190 Highland Avenue

City State Zip Code  
Moorestown NJ 08057

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation  
Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

Transaction ID: 81105.C41068

Amount of Each Receipt this Period  

	200.00
--	--------

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 2155

City State Zip Code  
Princeton NJ 08543-2155

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation  
Finance

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	8

Transaction ID: 81030.C40795

Amount of Each Receipt this Period  

	.00
--	-----

Memo  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 OCCUPATION/EMPLOYER

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

Mailing Address 109 Paloma Drive

City State Zip Code  
Miami FL 33143

FEC ID number of contributing federal political committee. C

Name of Employer Dutko Worldwide Occupation  
Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Transaction ID: 81023.C40500

Amount of Each Receipt this Period  

	250.00
--	--------

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00

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



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

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

FOR LINE NUMBER: PAGE 81 / 131  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Thaddeus Zuber

Mailing Address 60 Home Ave Apt N35

City State Zip Code  
Rutherford NJ 07070-1760

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

Name of Employer Occupation  
Retired Retired Priest

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

450.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	8

Transaction ID: 81102.C40852

Amount of Each Receipt this Period  
50.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	41387.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
AFSCME PAC

Mailing Address 1625 L Street NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81031.C40834

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Alzheimers Action PAC

Mailing Address PO Box 65209

City State Zip Code  
Washington DC 20035-5209

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40503

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Amer. Foreign Service Assn. PAC

Mailing Address 2101 E Street, NW

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40504

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 131  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
American Dental PAC

Mailing Address 1111 14th St., NW, Ste. 1100

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81030.C40793

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Hospital Association PAC

Mailing Address 325 Seventh Street, NW

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81031.C40835

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Nurses Association PAC

Mailing Address 8515 Georgia Avenue, Ste. 400

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C40704

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 131  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address American Postal Workers Union, AFL  
1300 L Street NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 10 / 23 / 2008  
**Transaction ID:** 81023.C40456  
 Amount of Each Receipt this Period 2500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Boilermakers-Blacksmiths LEAP

Mailing Address 753 State Avenue, Suite 565

City Kansas City State KS Zip Code 66101-2511

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81028.C40705  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC

Mailing Address 1920 L Street NW, Suite 800

City Washington State DC Zip Code 20036-4201

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1661.05

Date of Receipt 10 / 16 / 2008  
**Transaction ID:** 81016.C40104  
 Amount of Each Receipt this Period 24.10

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3524.10**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC

Mailing Address 1920 L Street NW, Suite 800

City State Zip Code  
Washington DC 20036-4201

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1669.87

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40429

Amount of Each Receipt this Period

8.82

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC

Mailing Address 1920 L Street NW, Suite 800

City State Zip Code  
Washington DC 20036-4201

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1671.87

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81030.C40736

Amount of Each Receipt this Period

2.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC

Mailing Address 1920 L Street NW, Suite 800

City State Zip Code  
Washington DC 20036-4201

FEC ID number of contributing federal political committee. **C** C00252940

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Primary 2010

Election Cycle-to-Date ▼  
20.56

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 9 / 2 0 0 8

Transaction ID: 81109.C41394

Amount of Each Receipt this Period

20.56

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

31.38

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

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

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

FOR LINE NUMBER: PAGE 86 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.** Full Name (Last, First, Middle Initial)  
League of Conservation Voters PAC  
Mailing Address 1920 L Street NW, Suite 800  
City Washington State DC Zip Code 20036-4201  
FEC ID number of contributing federal political committee. **C** C00252940  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) Primary 2010  
Election Cycle-to-Date 22.50  
Date of Receipt 11 / 12 / 2008  
Transaction ID: 81116.C41835  
Amount of Each Receipt this Period 1.94  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
NJ Republican Pro Life Coalition - Federal  
Mailing Address 37 Elm Street, Suite 16  
City Westfield State NJ Zip Code 07090  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 150.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: 81028.C40701  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
NOR PAC  
Mailing Address P.O. Box 5237  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date 2000.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: 81031.C40838  
Amount of Each Receipt this Period 2000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **2101.94**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
POL ED FUND of The BCTD

Mailing Address Building & Construction Trades Cou  
815 - 16th Street NW, Suite 600

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C40688

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Susan B. Anthony List Candidate Fund

Mailing Address 1800 North Kent Street, Suite 1070

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40502

Amount of Each Receipt this Period

1000.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
White Castle PAC

Mailing Address 555 W. Goodale Street

City State Zip Code  
Columbus OH 43215

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: 81023.C40501

Amount of Each Receipt this Period

250.00

Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2250.00

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

13907.42

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

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

FOR LINE NUMBER: PAGE 88 / 131  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

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

Mailing Address 2100 Nottingham Way

City State Zip Code  
Trenton NJ 08619-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼  
1336.89

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 2 / 2 0 0 8

**Transaction ID:** 81116.C41849

Amount of Each Receipt this Period  
1336.89

Offsets to Operating Expenditure  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Mailing Address Route 130 South

City State Zip Code  
Trenton NJ 08691-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼  
501.52

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 3 / 2 0 0 8

**Transaction ID:** 81124.C42045

Amount of Each Receipt this Period  
50.27

Offsets to Operating Expenditure  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1387.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1387.16</b>



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

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

FOR LINE NUMBER: PAGE 89 / 131

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
Nova List Company

Mailing Address 13755 Sunrise Valley Drive  
Suite 450

City State Zip Code  
Herndon VA 20171-

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼  
451.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: 81203.C42060

Amount of Each Receipt this Period

251.28

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Roma Bank

Mailing Address 2300 Route 33

City State Zip Code  
Robbinsville NJ 08691-1411

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Primary 2010

Election Cycle-to-Date ▼  
15341.12

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: 81122.C42037

Amount of Each Receipt this Period

284.30

Other Receipt

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

535.58

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

535.58

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

**A.**

Full Name (Last, First, Middle Initial)  
New Jersey Right To Life PAC

Transaction ID: 81016.E4244  
Date of Disbursement  
10 / 16 / 2008

Mailing Address Att: Marie Tasy  
242 Old New Brunswick Road

City Piscataway State NJ Zip Code 08854-  
Purpose of Disbursement list rental  
Candidate Name  
Category/Type

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

Amount of Each Disbursement this Period  
400.00  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**LIST RENTAL**

**B.**

Full Name (Last, First, Middle Initial)  
WOBM

Transaction ID: 81016.E4227  
Date of Disbursement  
10 / 16 / 2008

Mailing Address 2401 Route 66

City Ocean State NJ Zip Code 07712-  
Purpose of Disbursement Media-Radio Ads  
Candidate Name  
Category/Type

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

Amount of Each Disbursement this Period  
20180.00  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**MEDIA-RADIO ADS**

**C.**

Full Name (Last, First, Middle Initial)  
William McClintock Associates

Transaction ID: 81016.E4238  
Date of Disbursement  
10 / 16 / 2008

Mailing Address 1583 E. Second Street

City Scotch Plains State NJ Zip Code 07076-  
Purpose of Disbursement mailing lists  
Candidate Name  
Category/Type

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

Amount of Each Disbursement this Period  
1654.66  
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**MAILING LISTS**

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

22234.66

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Project Freedom, Inc.

Mailing Address 715 Kuser Road

City Hamilton State NJ Zip Code 08619-

Purpose of Disbursement  
event tickets

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81016.E4242  
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

1100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

EVENT TICKETS

B.

Full Name (Last, First, Middle Initial)  
Professional Firefighters Assn of NJ, IAFF

Mailing Address 24 West Lafayette Street

City Trenton State NJ Zip Code 08608-

Purpose of Disbursement  
Journal Ad

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81028.E4313  
Date of Disbursement

10 / 28 / 2008

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

JOURNAL AD

C.

Full Name (Last, First, Middle Initial)  
Mercer Cty Superintendent Of Elections

Mailing Address South Broad Street

City Trenton State NJ Zip Code 08650-

Purpose of Disbursement  
polling lists

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81026.E4270  
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

POLLING LISTS

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

1550.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Burlington Cty Superintendent Of Elections</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement voter lists</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81030.E4317 <b>Date of Disbursement</b> 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 154.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>VOTER LISTS</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United Bank</p> <p>Mailing Address 4501 Daly Drive</p> <p>City Chantilly State VA Zip Code 20151-</p> <p>Purpose of Disbursement merchant fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81122.E4367 <b>Date of Disbursement</b> 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 145.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>MERCHANT FEES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services</p> <p>Mailing Address 13755 Sunrise Valley Drive Suite 450</p> <p>City Herndon State VA Zip Code 20171-</p> <p>Purpose of Disbursement data services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81030.E4315 <b>Date of Disbursement</b> 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 65.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>DATA SERVICES</b></p>

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

**364.78**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Sunrise Data Services Mailing Address 13755 Sunrise Valley Drive Suite 450 City Herndon State VA Zip Code 20171- Purpose of Disbursement data services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81203.E4421 Date of Disbursement 11 / 20 / 2008
	Amount of Each Disbursement this Period 335.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DATA SERVICES

<b>B.</b> Full Name (Last, First, Middle Initial) Washington Intelligence Bureau Mailing Address 4128 Pepsi Place City Chantilly State VA Zip Code 20151- Purpose of Disbursement caging/escrow Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81030.E4316 Date of Disbursement 10 / 23 / 2008
	Amount of Each Disbursement this Period 908.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAGING/ESCROW

<b>C.</b> Full Name (Last, First, Middle Initial) Washington Intelligence Bureau Mailing Address 4128 Pepsi Place City Chantilly State VA Zip Code 20151- Purpose of Disbursement caging/escrow Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81203.E4420 Date of Disbursement 11 / 20 / 2008
	Amount of Each Disbursement this Period 414.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 CAGING/ESCROW

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1657.79
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Airnet  Mailing Address PO Box 11181  City Chattanooga State TN Zip Code 37401-  Purpose of Disbursement web interface fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4239 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 125.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  WEB INTERFACE FEE
B.	Full Name (Last, First, Middle Initial) Airnet  Mailing Address PO Box 11181  City Chattanooga State TN Zip Code 37401-  Purpose of Disbursement web interface Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81109.E4351 Date of Disbursement 11 / 09 / 2008  Amount of Each Disbursement this Period 125.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  WEB INTERFACE
C.	Full Name (Last, First, Middle Initial) Danch Farms LLC  Mailing Address 2445 Kuser Road  City Hamilton State NJ Zip Code 08690-  Purpose of Disbursement Rent HQ Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4277 Date of Disbursement 10 / 26 / 2008  Amount of Each Disbursement this Period 650.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  RENT HQ

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Newtek Merchant Solutions  Mailing Address 744 N 4th Street  City Milwaukee State WI Zip Code 53203-  Purpose of Disbursement Credit card processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81122.E4368 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 73.19  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>CREDIT CARD PROCESSING</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Newtek Merchant Solutions  Mailing Address 744 N 4th Street  City Milwaukee State WI Zip Code 53203-  Purpose of Disbursement Credit card processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81122.E4369 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 360.52  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>CREDIT CARD PROCESSING</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Millenium Radio  Mailing Address 109 Walters  City Trenton State NJ Zip Code 08638-  Purpose of Disbursement Media-Radio Ads Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4228 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 26180.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>MEDIA-RADIO ADS</b>

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

**26613.71**

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Millenium Radio Mailing Address 109 Walters City Trenton State NJ Zip Code 08638- Purpose of Disbursement Media-Radio Ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81028.E4310 Date of Disbursement 10 / 27 / 2008
	Amount of Each Disbursement this Period 11101.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	MEDIA-RADIO ADS
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Mercer County Central Labor Council Mailing Address c/o CWA Local 1034 1 Lower Ferry Road City W. Trenton State NJ Zip Code 08628- Purpose of Disbursement Journal Ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4233 Date of Disbursement 10 / 16 / 2008
	Amount of Each Disbursement this Period 300.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	JOURNAL AD
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Mercer County FOP Mailing Address City Trenton State NJ Zip Code 08650- Purpose of Disbursement journal ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81022.E4257 Date of Disbursement 10 / 19 / 2008
	Amount of Each Disbursement this Period 295.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	JOURNAL AD
	Category/ Type

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

**11696.00**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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

NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
LifeNews.com

Transaction ID: 81022.E4260  
Date of Disbursement

Mailing Address PO Box 1931

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	8

City State Zip Code  
Cheyenne WY 82003-

Amount of Each Disbursement this Period

1218.00
---------

Purpose of Disbursement

Web site ads

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

WEB SITE ADS

State: District:

B.

Full Name (Last, First, Middle Initial)  
L F, LLC

Transaction ID: 81031.E4324  
Date of Disbursement

Mailing Address 2445 Lyttonsville Road, #116

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

City State Zip Code  
Silver Spring MD 20910-

Amount of Each Disbursement this Period

2175.00
---------

Purpose of Disbursement

web video production

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

WEB VIDEO PRODUCTION

State: District:

C.

Full Name (Last, First, Middle Initial)  
Restore America PAC

Transaction ID: 81111.E4357  
Date of Disbursement

Mailing Address 5230 Harold Second Street

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	1		2	0	0	8

City State Zip Code  
Alexandria VA 22304-

Amount of Each Disbursement this Period

1200.50
---------

Purpose of Disbursement

List rental

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

LIST RENTAL

State: District:

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

4593.50

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) ABCO Printing	Transaction ID: 81026.E4269
	Mailing Address 115 North Gold Drive	Date of Disbursement 10 / 25 / 2008
	City Trenton State NJ Zip Code 08691-	Amount of Each Disbursement this Period 2996.00
	Purpose of Disbursement Printing	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING

B.	Full Name (Last, First, Middle Initial) ABCO Printing	Transaction ID: 81031.E4322
	Mailing Address 115 North Gold Drive	Date of Disbursement 10 / 31 / 2008
	City Trenton State NJ Zip Code 08691-	Amount of Each Disbursement this Period 34557.10
	Purpose of Disbursement Printing	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING

C.	Full Name (Last, First, Middle Initial) Mrs. Kathleen Anderson	Transaction ID: 81016.E4246
	Mailing Address 501 South Garfield Street	Date of Disbursement 10 / 16 / 2008
	City Arlington State VA Zip Code 22204-	Amount of Each Disbursement this Period 37.69
	Purpose of Disbursement event supplies	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT SUPPLIES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>37590.79</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Cablevision of Hamilton  Mailing Address PO Box 371378  City Pittsburgh State PA Zip Code 15250-  Purpose of Disbursement cable modems + replace voidck7605 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81111.E4358 Date of Disbursement 11 / 11 / 2008  Amount of Each Disbursement this Period 199.80  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CABLE MODEMS + REPLACE VO- IDCK7605
<b>B.</b>	Full Name (Last, First, Middle Initial) Cablevision of Monmouth  Mailing Address P.O. Box 19301  City Newark State NJ Zip Code 07195-0301  Purpose of Disbursement Cable Ads Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81022.E4261 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 15760.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CABLE ADS
<b>C.</b>	Full Name (Last, First, Middle Initial) Chase Card Services  Mailing Address PO Box 15153  City Wilmington State DE Zip Code 19886-  Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4278 Date of Disbursement 10 / 26 / 2008  Amount of Each Disbursement this Period 9391.15  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CREDIT CARD: SEE BELOW

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

**25350.95**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Mastoris

Mailing Address 144 Route 130

City Bordentown State NJ Zip Code 08505-

Purpose of Disbursement  
event catering

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81026.E4280  
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

959.07

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: EVENT CATERING

B.

Full Name (Last, First, Middle Initial)  
AT&T Wireless

Mailing Address P.O. Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement  
cell phone 2072

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81026.E4298  
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

115.39

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CELL PHONE 2072

C.

Full Name (Last, First, Middle Initial)  
ACME Market

Mailing Address 953 Route 33

City Trenton State NJ Zip Code 08690-

Purpose of Disbursement  
Volunteer supplies

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81026.E4287  
Date of Disbursement

10 / 26 / 2008

Amount of Each Disbursement this Period

471.27

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

MEMO: VOLUNTEER SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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





# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Charlie Palmer Steak House <hr/> Mailing Address <hr/> City: Washington State: DC Zip Code: 20015- Purpose of Disbursement: every catering Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4295 Date of Disbursement: 10 / 26 / 2008 <hr/> Amount of Each Disbursement this Period: 975.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: EVENY CATERING
B.	Full Name (Last, First, Middle Initial) Chapter House <hr/> Mailing Address: Route 9 S <hr/> City: Howell State: NJ Zip Code: 07731- Purpose of Disbursement: event catering Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4302 Date of Disbursement: 10 / 26 / 2008 <hr/> Amount of Each Disbursement this Period: 1493.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: EVENT CATERING
C.	Full Name (Last, First, Middle Initial) Applied Tactics <hr/> Mailing Address: 540-751-1393 VA <hr/> City: _____ State: _____ Zip Code: _____ Purpose of Disbursement: email account Candidate Name: _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4297 Date of Disbursement: 10 / 26 / 2008 <hr/> Amount of Each Disbursement this Period: 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: EMAIL ACCOUNT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Getty Gas Mailing Address Route 33 City Hightstown State NJ Zip Code 08520- Purpose of Disbursement travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4289 Date of Disbursement 10 / 26 / 2008
	Amount of Each Disbursement this Period 252.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
<b>B.</b> Full Name (Last, First, Middle Initial) GoDaddy Software, Inc. Mailing Address 14455 N. Hayden Road, Ste. 226 City Scottsdale State AZ Zip Code 85260- Purpose of Disbursement web page Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4296 Date of Disbursement 10 / 26 / 2008
	Amount of Each Disbursement this Period 89.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: WEB PAGE
<b>C.</b> Full Name (Last, First, Middle Initial) Hess Oil Mailing Address Route 33 East City Mercerville State NJ Zip Code 08619- Purpose of Disbursement travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4282 Date of Disbursement 10 / 26 / 2008
	Amount of Each Disbursement this Period 160.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE

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

0.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Home Depot Mailing Address 750 Hwy Route 130 City Trenton State NJ Zip Code 08691- Purpose of Disbursement campaign supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4283 Date of Disbursement 10 / 26 / 2008 Amount of Each Disbursement this Period 1765.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: CAMPAIGN SUPPLIES
B.	Full Name (Last, First, Middle Initial) Postmaster - Trenton Mailing Address City Trenton State NJ Zip Code 08650-9616 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4279 Date of Disbursement 10 / 26 / 2008 Amount of Each Disbursement this Period 623.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
C.	Full Name (Last, First, Middle Initial) Staples Mailing Address Hamilton Square 670 North Route 33 City Hamilton State NJ Zip Code 08619- Purpose of Disbursement Office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4281 Date of Disbursement 10 / 26 / 2008 Amount of Each Disbursement this Period 285.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 131

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b> Full Name (Last, First, Middle Initial) Wawa <hr/> Mailing Address <hr/> City Jackson State NJ Zip Code 08527- <hr/> Purpose of Disbursement travel expense <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4285 Date of Disbursement 10 / 26 / 2008
	Amount of Each Disbursement this Period 166.15
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSE
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Constance Carey <hr/> Mailing Address 21 Devon Court <hr/> City Robbinsville State NJ Zip Code 08691- <hr/> Purpose of Disbursement Payroll <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4247 Date of Disbursement 10 / 17 / 2008
	Amount of Each Disbursement this Period 873.89
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	PAYROLL
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Constance Carey <hr/> Mailing Address 21 Devon Court <hr/> City Robbinsville State NJ Zip Code 08691- <hr/> Purpose of Disbursement Payroll <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81031.E4327 Date of Disbursement 10 / 31 / 2008
	Amount of Each Disbursement this Period 873.89
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	PAYROLL
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1747.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 131

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Constance Carey	<b>Transaction ID:</b> 81116.E4359 Date of Disbursement 11 / 14 / 2008
	Mailing Address 21 Devon Court	Amount of Each Disbursement this Period 878.03
	City Robbinsville State NJ Zip Code 08691- Purpose of Disbursement Payroll Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>PAYROLL</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Loretta Charbonneau	<b>Transaction ID:</b> 81016.E4251 Date of Disbursement 10 / 17 / 2008
	Mailing Address 3 Dan Road	Amount of Each Disbursement this Period 1495.56
	City Trenton State NJ Zip Code 08620- Purpose of Disbursement Payroll Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>PAYROLL</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Loretta Charbonneau	<b>Transaction ID:</b> 81031.E4331 Date of Disbursement 10 / 31 / 2008
	Mailing Address 3 Dan Road	Amount of Each Disbursement this Period 1698.64
	City Trenton State NJ Zip Code 08620- Purpose of Disbursement Payroll Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General State: District: <input type="checkbox"/> Other (specify) ▼	<b>PAYROLL</b>

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

4072.23

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 131

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Loretta Charbonneau	Transaction ID: 81116.E4360 Date of Disbursement 11 / 14 / 2008
	Mailing Address 3 Dan Road	Amount of Each Disbursement this Period 937.38
	City Trenton State NJ Zip Code 08620-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Mr. Larry Clarici	Transaction ID: 81030.E4320 Date of Disbursement 10 / 29 / 2008
	Mailing Address 922 So. Clinton Ave.	Amount of Each Disbursement this Period 500.00
	City Trenton State NJ Zip Code 08611-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement T-Shirts Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		T-SHIRTS

C.	Full Name (Last, First, Middle Initial) Clarici Graphics	Transaction ID: 81109.E4350 Date of Disbursement 11 / 09 / 2008
	Mailing Address 88 Youngs Road	Amount of Each Disbursement this Period 909.50
	City Mercerville State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Signs Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SIGNS

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

2346.88

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Comcast

Mailing Address 90 Lake Drive

City Hightstown State NJ Zip Code 08520-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81022.E4263  
Date of Disbursement

10 / 20 / 2008

Amount of Each Disbursement this Period

22510.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
Comcast Ocean

Mailing Address 145 Wyckoff Road

City Eatontown State NJ Zip Code 07724-

Purpose of Disbursement  
Cable Ads

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81022.E4262  
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

15000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CABLE ADS

C.

Full Name (Last, First, Middle Initial)  
Community News Services, LLC

Mailing Address 2 Princess Road, Suite 1G

City Lawrenceville State NJ Zip Code 08648-

Purpose of Disbursement  
Newspaper Ads

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81102.E4336  
Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

1528.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NEWSPAPER ADS

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

39038.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Federal Express

Mailing Address P.O. Box 371461

City Pittsburgh State PA Zip Code 15250-7461

Purpose of Disbursement  
courier

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81022.E4254  
Date of Disbursement

10 / 19 / 2008

Amount of Each Disbursement this Period

41.30

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COURIER

B.

Full Name (Last, First, Middle Initial)  
Martin Gillespie

Mailing Address 1216 Maple Avenue

City Atco State NJ Zip Code 08004-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81016.E4248  
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

1673.35

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

C.

Full Name (Last, First, Middle Initial)  
Martin Gillespie

Mailing Address 1216 Maple Avenue

City Atco State NJ Zip Code 08004-

Purpose of Disbursement  
Office supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81028.E4312  
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

69.55

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

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

1784.20

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Martin Gillespie

Mailing Address 1216 Maple Avenue

City Atco State NJ Zip Code 08004-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81031.E4328  
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1673.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PAYROLL

B.

Full Name (Last, First, Middle Initial)  
Martin Gillespie

Mailing Address 1216 Maple Avenue

City Atco State NJ Zip Code 08004-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81116.E4361  
Date of Disbursement

11 / 14 / 2008

Amount of Each Disbursement this Period

1673.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PAYROLL

C.

Full Name (Last, First, Middle Initial)  
James Gilroy

Mailing Address 63 West Shore Drive

City Pennington State NJ Zip Code 08534-

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 81016.E4249  
Date of Disbursement

10 / 17 / 2008

Amount of Each Disbursement this Period

912.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

PAYROLL

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

4259.49

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) James Gilroy <hr/> Mailing Address 63 West Shore Drive <hr/> City Pennington State NJ Zip Code 08534- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81031.E4329 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 912.79 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) James Gilroy <hr/> Mailing Address 63 West Shore Drive <hr/> City Pennington State NJ Zip Code 08534- <hr/> Purpose of Disbursement Office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81105.E4340 Date of Disbursement 11 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 71.22 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  OFFICE SUPPLIES
<b>C.</b>	Full Name (Last, First, Middle Initial) James Gilroy <hr/> Mailing Address 63 West Shore Drive <hr/> City Pennington State NJ Zip Code 08534- <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81116.E4362 Date of Disbursement 11 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 912.79 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1896.80
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) James Gilroy  Mailing Address 63 West Shore Drive  City Pennington State NJ Zip Code 08534-  Purpose of Disbursement travel expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81116.E4366 Date of Disbursement 11 / 14 / 2008  Amount of Each Disbursement this Period 178.20  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>TRAVEL EXPENSE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Group Ventures Unlimited, LLC  Mailing Address 3 Intervale Road, #B  City Trenton State NJ Zip Code 08620-  Purpose of Disbursement automated phonebank Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81111.E4355 Date of Disbursement 11 / 11 / 2008  Amount of Each Disbursement this Period 11248.61  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>AUTOMATED PHONEBANK</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) PR Promotions  Mailing Address P.O. Box 34407  City Bethesda State MD Zip Code 20827-  Purpose of Disbursement bumper stickers + freight charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4237 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 404.02  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>BUMPER STICKERS + FREIGHT CHARGES</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>11830.83</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) PR Promotions	Transaction ID: 81026.E4268 Date of Disbursement 10 / 24 / 2008
	Mailing Address P.O. Box 34407	Amount of Each Disbursement this Period 4480.00
	City Bethesda State MD Zip Code 20827-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Signs	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SIGNS

B.	Full Name (Last, First, Middle Initial) PR Promotions	Transaction ID: 81031.E4323 Date of Disbursement 10 / 31 / 2008
	Mailing Address P.O. Box 34407	Amount of Each Disbursement this Period 946.23
	City Bethesda State MD Zip Code 20827-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement freight charges	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FREIGHT CHARGES

C.	Full Name (Last, First, Middle Initial) Kristin Kenny	Transaction ID: 81016.E4250 Date of Disbursement 10 / 17 / 2008
	Mailing Address 29 Cold Spring Road	Amount of Each Disbursement this Period 568.91
	City Hamilton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5995.14
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Kristin Kenny <hr/> Mailing Address 29 Cold Spring Road <hr/> City Hamilton State NJ Zip Code 08619- <hr/> Purpose of Disbursement Office supplies Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81022.E4265 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 30.50 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>OFFICE SUPPLIES</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Kristin Kenny <hr/> Mailing Address 29 Cold Spring Road <hr/> City Hamilton State NJ Zip Code 08619- <hr/> Purpose of Disbursement Payroll Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81031.E4330 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 568.91 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PAYROLL</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Kristin Kenny <hr/> Mailing Address 29 Cold Spring Road <hr/> City Hamilton State NJ Zip Code 08619- <hr/> Purpose of Disbursement Volunteer supplies Candidate Name <span style="float: right;">Category/Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81105.E4339 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 39.94 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>VOLUNTEER SUPPLIES</b>

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

**639.35**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Kristin Kenny	Transaction ID: 81116.E4363 Date of Disbursement 11 / 14 / 2008
	Mailing Address 29 Cold Spring Road	Amount of Each Disbursement this Period 568.91
	City Hamilton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Kristin Kenny	Transaction ID: 81116.E4365 Date of Disbursement 11 / 14 / 2008
	Mailing Address 29 Cold Spring Road	Amount of Each Disbursement this Period 12.40
	City Hamilton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		POSTAGE

C.	Full Name (Last, First, Middle Initial) William Kenny, DMD	Transaction ID: 81026.E4276 Date of Disbursement 10 / 26 / 2008
	Mailing Address 304 White Horse Road	Amount of Each Disbursement this Period 500.00
	City Hamilton State NJ Zip Code 08610-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent HQ Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		RENT HQ

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1081.31
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Labels & Lists, Inc.	Transaction ID: 81111.E4354 Date of Disbursement 11 / 11 / 2008
	Mailing Address 2500 - 116th Avenue NE	Amount of Each Disbursement this Period 4071.76
	City Bellevue State WA Zip Code 98004-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement mailing lists Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MAILING LISTS

B.	Full Name (Last, First, Middle Initial) Donal McCarthy	Transaction ID: 81111.E4356 Date of Disbursement 11 / 11 / 2008
	Mailing Address 117 Penn Street	Amount of Each Disbursement this Period 1125.00
	City Camden State NJ Zip Code 08102-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement web maintenance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		WEB MAINTENANCE

C.	Full Name (Last, First, Middle Initial) James McSorley	Transaction ID: 81109.E4344 Date of Disbursement 11 / 09 / 2008
	Mailing Address 81 Miry Brook Road	Amount of Each Disbursement this Period 500.00
	City Hamilton Square State NJ Zip Code 08690-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement event catering Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT CATERING

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

5696.76

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Minuteman Press	Transaction ID: 81016.E4236 Date of Disbursement 10 / 16 / 2008
	Mailing Address 2100 Nottingham Way	Amount of Each Disbursement this Period 3588.56
	City Trenton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing/ mailing Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING/MAILING

B.	Full Name (Last, First, Middle Initial) Minuteman Press	Transaction ID: 81022.E4258 Date of Disbursement 10 / 19 / 2008
	Mailing Address 2100 Nottingham Way	Amount of Each Disbursement this Period 1701.00
	City Trenton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage for mailing Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		POSTAGE FOR MAILING

C.	Full Name (Last, First, Middle Initial) Minuteman Press	Transaction ID: 81109.E4352 Date of Disbursement 11 / 09 / 2008
	Mailing Address 2100 Nottingham Way	Amount of Each Disbursement this Period 22129.16
	City Trenton State NJ Zip Code 08619-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing/ mailing Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PRINTING/MAILING

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>27418.72</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: 81016.E4253 Date of Disbursement 10 / 17 / 2008
	Mailing Address PO Box 387	Amount of Each Disbursement this Period 2370.62
	City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll taxes impounded	PAYROLL TAXES IMPOUNDED
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: 81031.E4332 Date of Disbursement 10 / 31 / 2008
	Mailing Address PO Box 387	Amount of Each Disbursement this Period 2422.37
	City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll taxes impounded	PAYROLL TAXES IMPOUNDED
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex, Inc.	Transaction ID: 81111.E4353 Date of Disbursement 11 / 10 / 2008
	Mailing Address PO Box 387	Amount of Each Disbursement this Period 228.12
	City Marlton State NJ Zip Code 08053-0387	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Professional Services	PROFESSIONAL SERVICES
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5021.11</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Paychex, Inc.  Mailing Address PO Box 387  City Marlton State NJ Zip Code 08053-0387  Purpose of Disbursement Payroll taxes impounded Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81116.E4364 Date of Disbursement 11 / 14 / 2008  Amount of Each Disbursement this Period 2067.19  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PAYROLL TAXES IMPOUNDED</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) People Papers  Mailing Address Att: Bill Ryan PO Box 557  City Bordentown State NJ Zip Code 08505-  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4226 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>ADVERTISING</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Postmaster--MAIN Route 130  Mailing Address Route 130 South  City Trenton State NJ Zip Code 08691-  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4231 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 26875.67  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>POSTAGE</b>

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

**29442.86**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 131

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.	Full Name (Last, First, Middle Initial) Postmaster--MAIN Route 130	Transaction ID: 81023.E4266 Date of Disbursement
	Mailing Address Route 130 South	<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Trenton State NJ Zip Code 08691-	Amount of Each Disbursement this Period
	Purpose of Disbursement mailing	<input type="text" value="3839.43"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	MAILING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Postmaster--MAIN Route 130	Transaction ID: 81022.E4264 Date of Disbursement
	Mailing Address Route 130 South	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City Trenton State NJ Zip Code 08691-	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="21409.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Postmaster--MAIN Route 130	Transaction ID: 81026.E4271 Date of Disbursement
	Mailing Address Route 130 South	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City Trenton State NJ Zip Code 08691-	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="20033.19"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	POSTAGE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Transaction ID: 81026.E4272  
Date of Disbursement

Mailing Address Route 130 South

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	8

City State Zip Code  
Trenton NJ 08691-

Amount of Each Disbursement this Period

19081.78
----------

Purpose of Disbursement  
Postage  
Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

POSTAGE

B.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Transaction ID: 81028.E4311  
Date of Disbursement

Mailing Address Route 130 South

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

City State Zip Code  
Trenton NJ 08691-

Amount of Each Disbursement this Period

2988.90
---------

Purpose of Disbursement  
Postage  
Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

POSTAGE

C.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Transaction ID: 81028.E4314  
Date of Disbursement

Mailing Address Route 130 South

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

City State Zip Code  
Trenton NJ 08691-

Amount of Each Disbursement this Period

16560.70
----------

Purpose of Disbursement  
Postage  
Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

POSTAGE

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

38631.38

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Mailing Address Route 130 South

City State Zip Code  
Trenton NJ 08691-

Purpose of Disbursement  
Replenish BRE account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81030.E4318

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REPLENISH BRE ACCOUNT

B.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Mailing Address Route 130 South

City State Zip Code  
Trenton NJ 08691-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81102.E4334

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

5292.60

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

C.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Mailing Address Route 130 South

City State Zip Code  
Trenton NJ 08691-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81102.E4333

Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

32156.70

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

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

37849.30

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Transaction ID: 81102.E4335

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	8

Mailing Address Route 130 South

Amount of Each Disbursement this Period

7	2	1	.	8	3
---	---	---	---	---	---

City State Zip Code  
Trenton NJ 08691-

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Postmaster--MAIN Route 130

Transaction ID: 81109.E4343

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	0	8

Mailing Address Route 130 South

Amount of Each Disbursement this Period

4	0	0	.	0	0
---	---	---	---	---	---

City State Zip Code  
Trenton NJ 08691-

Purpose of Disbursement  
BRE account

Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BRE ACCOUNT

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Press Communications, LLC

Transaction ID: 81016.E4230

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Mailing Address 1329 Campus Parkway

Amount of Each Disbursement this Period

9	6	0	.	0	0
---	---	---	---	---	---

City State Zip Code  
Neptune NJ 07753-

Purpose of Disbursement  
Media-Radio Ads

Candidate Name

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA-RADIO ADS

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

10721.83

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) PSEG Mailing Address PO Box 14106 City New Brunswick State NJ Zip Code 08906- Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81026.E4275 <b>Date of Disbursement</b> 10 / 26 / 2008 Amount of Each Disbursement this Period 175.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 UTILITIES	
<b>B.</b>	Full Name (Last, First, Middle Initial) Roma Bank Mailing Address 2300 Route 33 City Robbinsville State NJ Zip Code 08691-1411 Purpose of Disbursement returned check fee - Lombardo Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81030.E4321 <b>Date of Disbursement</b> 10 / 30 / 2008 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RETURNED CHECK FEE - LOMB-ARDO	
<b>C.</b>	Full Name (Last, First, Middle Initial) Roma Bank Mailing Address 2300 Route 33 City Robbinsville State NJ Zip Code 08691-1411 Purpose of Disbursement returned check - Vining Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81124.E4370 <b>Date of Disbursement</b> 11 / 17 / 2008 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RETURNED CHECK - VINING	

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

195.87

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Tait Recording Services, Inc.  Mailing Address 1508 Pernell Court  City Bowie State MD Zip Code 20716-  Purpose of Disbursement media-studio time Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4245 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 845.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MEDIA-STUDIO TIME
<b>B.</b>	Full Name (Last, First, Middle Initial) Tait Recording Services, Inc.  Mailing Address 1508 Pernell Court  City Bowie State MD Zip Code 20716-  Purpose of Disbursement media-studio time/editing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81031.E4325 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 900.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MEDIA-STUDIO TIME/EDITING
<b>C.</b>	Full Name (Last, First, Middle Initial) Tait Recording Services, Inc.  Mailing Address 1508 Pernell Court  City Bowie State MD Zip Code 20716-  Purpose of Disbursement media-studio time Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81109.E4346 Date of Disbursement 11 / 09 / 2008  Amount of Each Disbursement this Period 605.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  MEDIA-STUDIO TIME

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

2350.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Tarrance Group</p> <p>Mailing Address 201 N. Union Street, Ste. 410</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement telephone poll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81016.E4235</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 7568.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>TELEPHONE POLL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Traz Group</p> <p>Mailing Address 26 South Maple Avenue Suite 205</p> <p>City Marlton State NJ Zip Code 08053-</p> <p>Purpose of Disbursement Printing/ mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81016.E4232</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 24450.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PRINTING/MAILING</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Traz Group</p> <p>Mailing Address 26 South Maple Avenue Suite 205</p> <p>City Marlton State NJ Zip Code 08053-</p> <p>Purpose of Disbursement printing/ mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81030.E4319</p> <p>Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 47800.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>PRINTING/MAILING</p>

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

79818.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) The Traz Group  Mailing Address 26 South Maple Avenue Suite 205  City Marlton State NJ Zip Code 08053-  Purpose of Disbursement Printing/ mailing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81109.E4347 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>27215.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PRINTING/MAILING	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	9	/	2	0	0	8	27215.00
M	M	/	D	D	/	Y	Y	Y	Y															
1	1	/	0	9	/	2	0	0	8															
27215.00																								
<b>B.</b>	Full Name (Last, First, Middle Initial) Trice Talent Services, Inc.  Mailing Address 905 West 7th Street, #342  City Frederick State MD Zip Code 21701-  Purpose of Disbursement Voiceover talent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81016.E4234 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2974.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  VOICEOVER TALENT	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	6	/	2	0	0	8	2974.00
M	M	/	D	D	/	Y	Y	Y	Y															
1	0	/	1	6	/	2	0	0	8															
2974.00																								
<b>C.</b>	Full Name (Last, First, Middle Initial) Trice Talent Services, Inc.  Mailing Address 905 West 7th Street, #342  City Frederick State MD Zip Code 21701-  Purpose of Disbursement Voiceover talent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 81102.E4337 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2705.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  VOICEOVER TALENT	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	8	2705.00
M	M	/	D	D	/	Y	Y	Y	Y															
1	1	/	0	2	/	2	0	0	8															
2705.00																								

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

**32894.00**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<p><b>A.</b> Full Name (Last, First, Middle Initial) Trice Talent Services, Inc.</p> <p>Mailing Address 905 West 7th Street, #342</p> <p>City Frederick State MD Zip Code 21701-</p> <p>Purpose of Disbursement Voiceover talent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81109.E4348 <b>Date of Disbursement</b> 11 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 870.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>VOICEOVER TALENT</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) William Valentine</p> <p>Mailing Address 6487 Warwick Circle</p> <p>City Alexandria State VA Zip Code 22315-</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81016.E4252 <b>Date of Disbursement</b> 10 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 182.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>PAYROLL</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) William Valentine</p> <p>Mailing Address 6487 Warwick Circle</p> <p>City Alexandria State VA Zip Code 22315-</p> <p>Purpose of Disbursement volunteer food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81026.E4273 <b>Date of Disbursement</b> 10 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 31.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>VOLUNTEER FOOD</b></p>

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

1083.72

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address PO Box 4833  City Trenton State NJ Zip Code 08650-4833  Purpose of Disbursement phones 4755 7350 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81016.E4240 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 261.72  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PHONES 4755 7350
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon  Mailing Address PO Box 4833  City Trenton State NJ Zip Code 08650-4833  Purpose of Disbursement phones 7350 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81026.E4274 Date of Disbursement 10 / 26 / 2008  Amount of Each Disbursement this Period 424.79  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  PHONES 7350
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless  Mailing Address P.O. Box 17464  City Baltimore State MD Zip Code 21297-1464  Purpose of Disbursement cell 8984 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81022.E4256 Date of Disbursement 10 / 19 / 2008  Amount of Each Disbursement this Period 69.12  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  CELL 8984

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

**755.63**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
Committee To Reelect Congressman Chris Smith

A.

Full Name (Last, First, Middle Initial)  
WZBN-TV Inc

Mailing Address 77 Shady Lane

City State Zip Code  
Trenton NJ 08619-

Purpose of Disbursement  
Media Ads

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81023.E4267

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

MEDIA ADS

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

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