

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Aimee Belgard for Congress			
ADDRESS (number and street) PO Box 35			
CITY, STATE, and ZIP CODE Willingboro NJ 08046			
2. NAME OF CANDIDATE Aimee Belgard	3. OFFICE SOUGHT (State and District) House NJ 03		4. FEC IDENTIFICATION NUMBER C00550103
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Norma Carter 17 Linden Rd Burlington NJ 08016-1050		Name of Employer Self-Employed Transaction ID : VN911D48KB8 Occupation Attorney	Date (month, day, year) 10/18/2014 Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
CoryPAC, Inc. 60 Park Pl Fl 1 Newark NJ 07102-5511		Name of Employer Transaction ID : VN911D48QY4 Occupation	Date (month, day, year) 10/18/2014 Amount 2500.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Gallego for Congress PO Box 1710 Phoenix AZ 85001-1710		Name of Employer Transaction ID : VN911D48RJ2 Occupation	Date (month, day, year) 10/18/2014 Amount 2000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
John Horner 46 Ladyslipper Ln Florence MA 01062-9735		Name of Employer Not Employed Transaction ID : VN911D4CMK3 Occupation Not Employed	Date (month, day, year) 10/18/2014 Amount 1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Steve Klinghoffer 55 Morris Ave Springfield NJ 07081-1426		Name of Employer WPI Communications Transaction ID : VN911D48JH2 Occupation President and Founder	Date (month, day, year) 10/18/2014 Amount 1000.00
SIGNATURE (optional) Sander Friedman		DATE 10/20/2014	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
<i>[Electronically Filed]</i>			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 07/2011)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
National Committee to Preserve Social Security and Medicare PAC 10 G St NE Ste 600 Washington DC 20002-4253	Transaction ID : VN911D48QV0 Occupation	10/18/2014	1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount