

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 2018 AUG 16 PM 12:10 Office Use Only

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

ADDRESS (number and street) 360 Stonehill Road Freehold NJ 07728 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C 00563874 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NJ SE

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 MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 04 / 01 / 2018 through 06 / 30 / 2018

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 Nathan Davidson Signature of Treasurer Date 07 / 15 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

201808160200690724

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

PEZZULLO FOR SENATOR

Report Covering the Period:

From:

04 / 01 / 2018

To:

06 / 30 / 2018

	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)) ..	1845.00	20,050.54
(b) Total Contribution Refunds (from Line 20(d)) ..		
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	1,845.00	20,050.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	2052.61	16579.21
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	123.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	2,052.61	16,455.46
8. Cash on Hand at Close of Reporting Period (from Line 27)...	1,296.17	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..	15,000.00	

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

201808160200690725

DETAILED SUMMARY PAGE

of Receipts

Write or Type Committee Name

PEZZULLO FOR SENATOR

Report Covering the Period: From: 04 / 01 / 2018 To: 06 / 30 / 2018

I. RECEIPTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)...

1845.00

17,096.00

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals

1845.00

17,096.00

(b) Political Party Committees...

0.00

500.00

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

(d) The Candidate.....

0.00

2,131.83

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))...

1845.00

19,727.80

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

13. LOANS:

(a) Made or Guaranteed by the Candidate...

00

115,000.00

(b) All Other Loans...

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

115,000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...

0.00

123.75

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

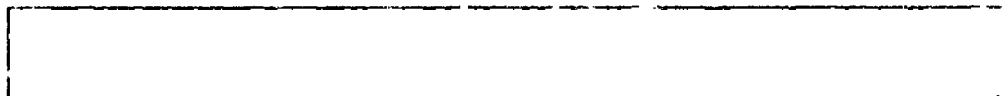
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

1,845.00

134,851.60

201808160200690726



DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	2,052.61	16,579.20
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	1,500.00	1,500.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	100,000.00	115,000.00
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	100,000.00	115,000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...		
(b) Political Party Committees...		
(c) Other Political Committees (such as PACs) ..		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...		
21. OTHER DISBURSEMENTS ..	0.00	845.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	103,552.60	133,924.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	103,003.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1,845.00
25. SUBTOTAL (add Line 23 and Line 24) ..	104,848.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	103,552.60
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	1,296.17

201808160200690727

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

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

FOR LINE NUMBER: PAGE **1** OF **6**

(check only one)

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

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)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Simonelli, Vincent J			Date of Receipt 4^M / 01 / 2018		
Mailing Address PO Box 622					
City Forked River	State NJ	Zip Code 08701			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
Name of Employer Dream Homes		Occupation Builder	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 700.00			

Full Name (Last, First, Middle Initial) B. Simonelli, Vincent J			Date of Receipt 05 / 01 / 2018		
Mailing Address PO Box 622					
City Forked River	State NJ	Zip Code 08701			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
Name of Employer Dream Homes		Occupation Builder	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 800.00			

Full Name (Last, First, Middle Initial) C. Simonelli, Vincent J			Date of Receipt 06 / 01 / 2018		
Mailing Address PO Box 622					
City Forked River	State NJ	Zip Code 08701			
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00		
Name of Employer Dream Homes		Occupation Builder	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 900.00			

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

201808160200690728

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

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

FOR LINE NUMBER: PAGE **2** OF **6**
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

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

Mailing Address
85 South Street

City **Freehold** State **NJ** Zip Code **07728**

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

Name of Employer **Mintz and Torre** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
250.00

Date of Receipt
4^M / 13 / 2018

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mintz, Michael

Mailing Address
85 South Street

City **Freehold** State **NJ** Zip Code **07728**

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

Name of Employer **Mintz and Torre** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
300.00

Date of Receipt
05^M / 13 / 2018

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mintz, Michael

Mailing Address
85 South Street

City **Freehold** State **NJ** Zip Code **07728**

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

Name of Employer **Mintz and Torre** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
350.00

Date of Receipt
06^M / 01 / 2018

Amount of Each Receipt this Period
50.00

Memo Item

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

150.00

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

201808160200690729

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

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

FOR LINE NUMBER: PAGE **3** OF **6**

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

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

Mailing Address
100 Woodbridge, Suite 213

City **Woodbridge** State **NJ** Zip Code **07095**

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

Name of Employer **Gaines, Goldenfarb CPA** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **700.00**

Date of Receipt
4 / **29** / **2018**

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Mintz, Michael

Mailing Address
85 South Street

City **Freehold** State **NJ** Zip Code **07728**

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

Name of Employer **Mintz and Torre CPA** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **800.00**

Date of Receipt
05 / **29** / **2018**

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mintz, Michael

Mailing Address
85 South Street

City **Freehold** State **NJ** Zip Code **07728**

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

Name of Employer **Mintz and Torre CPA** Occupation **CPA**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **900.00**

Date of Receipt
06 / **29** / **2018**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶

300.00

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

201808160200690730

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

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

FOR LINE NUMBER: PAGE **4** OF **6**

(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)
Pezzullo For Senator

A. Provenazno, Anthony

Full Name (Last, First, Middle Initial)
Provenazno, Anthony

Mailing Address
1850 South Ocean Drive

City **Hallandale** State **FL** Zip Code **33009**

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

Name of Employer **Soap Creative** Occupation **General MGR**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **1000.00**

Date of Receipt **4^M / 03 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

B. Provenazno, Anthony

Full Name (Last, First, Middle Initial)
Provenazno, Anthony

Mailing Address
1850 South Ocean Drive

City **Hallandale** State **FL** Zip Code **33009**

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

Name of Employer **Soap Creative** Occupation **General MGR**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **1250.00**

Date of Receipt **05^M / 03 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

C. Provenazno, Anthony

Full Name (Last, First, Middle Initial)
Provenazno, Anthony

Mailing Address
1850 South Ocean Drive

City **Hallandale** State **FL** Zip Code **33009**

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

Name of Employer **Soap Creative** Occupation **General MGR**

Receipt For:
 Primary General
 Other (specify) **▼**

Election Cycle-to-Date **1500.00**

Date of Receipt **06^M / 03 / 2018**

Amount of Each Receipt this Period **250.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

201808160200690731

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

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Kronish, Ben		Date of Receipt 4th / 27 / 2018
Mailing Address 355 Lexington Ave		Amount of Each Receipt this Period 100.00
City New York	State NY Zip Code 10017	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Kronish Associates	Occupation Life Ins Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Kronish, Ben		Date of Receipt 5th / 27 / 2018
Mailing Address 355 Lexington Ave		Amount of Each Receipt this Period 100.00
City New York	State NY Zip Code 10017	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Kronish Associates	Occupation Life Ins Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) C. Kronish, Ben		Date of Receipt 6th / 27 / 2018
Mailing Address 355 Lexington Ave		Amount of Each Receipt this Period 100.00
City New York	State NY Zip Code 10017	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Kronish Associates	Occupation Life Ins Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 700.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

201808160200690732

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 6	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Atti, Joseph		Date of Receipt 4^M / 27 / 2018^Y	
Mailing Address 939 NJ Rt 36			
City Union Beach	State NJ	Zip Code 07735	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 20.00		
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Kronish, Ben		Date of Receipt 5^M / 27 / 2018^Y	
Mailing Address 355 Lexington Ave			
City New York	State NY	Zip Code 10017	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Manalapan Englishtown BOE Teacher	Occupation Manalapan Englishtown BOE Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 25.00		
		<input type="checkbox"/> Memo Item	

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

SUBTOTAL of Receipts This Page (optional)	45.00
TOTAL This Period (last page this line number only)	1,845.00

201808160200690733

**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)

17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Pezzullo For Senator

Full Name (Last, First, Middle Initial)

A. DelPresto, Danielle

Mailing Address

85 South Street

City

Freehold

State

NJ

Zip Code

07728

Purpose of Disbursement

Staffing at Convention

007

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

04 / 13 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

154.19

Memo Item

Full Name (Last, First, Middle Initial)

B. Optimum Online

Mailing Address

200 Jerico Turnpike

City

Jerico

State

NY

Zip Code

11753

Purpose of Disbursement

Internet and phones

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

04 / 13 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

329.12

Memo Item

Full Name (Last, First, Middle Initial)

C. UPS Store

Mailing Address

1358 Hooper Ave

City

Toms River

State

NJ

Zip Code

08753

Purpose of Disbursement

Mailing Reports

001

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

04 / 16 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

24.70

Memo Item

SUBTOTAL of Disbursements This Page (optional) ...

508.01

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

201808160200690734

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

A. NJGOP

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **04 / 19 / 2018**

Mailing Address: **150 W. State Street #230**

City: **Trenton** State: **NJ** Zip Code: **08608**

Purpose of Disbursement: **Donation** Category/Type: **011**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

FEC Identification Number: **C** _____

Amount of Each Disbursement this Period: **150.00**

Memo Item

B. Nation Builder

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **04 / 13 / 2018**

Mailing Address: **520 S. Grand Ave**

City: **Los Angeles** State: **CA** Zip Code: **90071**

Purpose of Disbursement: **Web hosting 4,5,6 2018** Category/Type: **001**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

FEC Identification Number: **C** _____

Amount of Each Disbursement this Period: **267.00**

Memo Item

C. Coalition for Better South Plainfield

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: **06 / 18 / 2018**

Mailing Address: **3112 Woodland Ave**

City: **South Plainfield** State: **NJ** Zip Code: **07080**

Purpose of Disbursement: **Donation** Category/Type: **011**

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

FEC Identification Number: **C** _____

Amount of Each Disbursement this Period: **300.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **717.00**

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

201808160200690735

**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)

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)

Pezzullo For Senator

Full Name (Last, First, Middle Initial)

A. Authorize Dot Net

Date of Disbursement

04 / 02 / 2018

Mailing Address

PO Box 947

City

American Fork

State

UT

Zip Code

84403

Purpose of Disbursement

Gateway Fee

003

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.10

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. Authorize Dot Net

Date of Disbursement

05 / 02 / 2018

Mailing Address

PO Box 947

City

American Fork

State

UT

Zip Code

84403

Purpose of Disbursement

Gateway Fee

003

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.05

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. Authorize Dot Net

Date of Disbursement

06 / 04 / 2018

Mailing Address

PO Box 947

City

American Fork

State

UT

Zip Code

84403

Purpose of Disbursement

Gateway Fee

003

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.05

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

Memo Item

State:

District:

SUBTOTAL of Disbursements This Page (optional) ...

144.22

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

201808160200690736

**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 4 OF 6	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Flagship Merchant Svcs		Date of Disbursement 04 / 02 / 2018
Mailing Address PO Box 3429		FEC Identification Number C
City Thousand Oaks	State CA	
Zip Code 91539		Amount of Each Disbursement this Period 64.79
Purpose of Disbursement Credit Card Processing		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) B. Flagship Merchant Svcs		Date of Disbursement 05 / 02 / 2018
Mailing Address PO Box 3429		FEC Identification Number C
City Thousand Oaks	State CA	
Zip Code 91539		Amount of Each Disbursement this Period 65.57
Purpose of Disbursement Credit Card Processing		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. Flagship Merchant Svcs		Date of Disbursement 06 / 04 / 2018
Mailing Address PO Box 3429		FEC Identification Number C
City Thousand Oaks	State CA	
Zip Code 91539		Amount of Each Disbursement this Period 65.57
Purpose of Disbursement Credit Card Processing		<input type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)...	195.93
TOTAL This Period (last page this line number only)...	

201808160200690737

**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)

17
20a 18
20b 19a
20c 19b
21

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NAME OF COMMITTEE (In Full)

Pezzullo For Senator

Full Name (Last, First, Middle Initial)

A. Anedot, Inc

Mailing Address

4107 Buena Vista St #109

City

Dallas

State

TX

Zip Code

75204

Purpose of Disbursement

20 Credit Card Processing

003

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

05 / 17 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

46.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Lori Gallagher

Mailing Address

PO Box 67

City

Belford

State

NJ

Zip Code

07718

Purpose of Disbursement

Graphics Design

006

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

04 / 13 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Investors Bank

Mailing Address

101 Wood Avenue South

City

Islin

State

NJ

Zip Code

08839

Purpose of Disbursement

Bank Fees

001

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

04 / 23 / 2018

FEC Identification Number

C

Amount of Each Disbursement this Period

65.57

Memo Item

SUBTOTAL of Disbursements This Page (optional) ...

508.01

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

201808160200690738

**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 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Sam Thompson For Senate		Date of Disbursement 04 / 24 / 2018
Mailing Address 5 Lincroft Ave		FEC Identification Number C
City Old Bridge	State NJ	
Zip Code 08857		Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Donation		<input type="checkbox"/> Memo Item
Candidate Name 011 Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional)...	75.00
TOTAL This Period (last page this line number only)...	2052.61

201808160200690739

**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 1 OF 1	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

Full Name (Last, First, Middle Initial) A. Richard J. Pezzullo		Date of Disbursement 06 / 21 / 2018
Mailing Address 360 Stonehill Road		FEC Identification Number C
City Freehold	State NJ	
Zip Code 07728		Amount of Each Disbursement this Period 30,000.00
Purpose of Disbursement Loan Repayment		<input type="checkbox"/> Memo Item
Candidate Name Richard J. Pezzullo		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 009	

Full Name (Last, First, Middle Initial) B. Richard J. Pezzullo		Date of Disbursement 06 / 28 / 2018
Mailing Address 360 Stonehill Road		FEC Identification Number C
City Freehold	State NJ	
Zip Code 07728		Amount of Each Disbursement this Period 70,000.00
Purpose of Disbursement Loan Repayment		<input type="checkbox"/> Memo Item
Candidate Name Richard J. Pezzullo		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type 009	

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

SUBTOTAL of Disbursements This Page (optional)...	100,000.00
TOTAL This Period (last page this line number only)...	100,000.00

201808160200690740

**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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Pezzullo For Senator

A. Rich Pezzullo for Congress

Full Name (Last, First, Middle Initial): **Rich Pezzullo for Congress**

Date of Disbursement: **06 / 13 / 2018**

Mailing Address: **330 Mounts Corner Drive**

City: **Freehold** State: **NJ** Zip Code: **07728**

Purpose of Disbursement: **Transfer to Committee** Category/Type: **008**

Candidate Name: **Richard Pezzullo**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C 00680249**

Amount of Each Disbursement this Period: **1000.00**

Memo Item

B. Rich Pezzullo for Congress

Full Name (Last, First, Middle Initial): **Rich Pezzullo for Congress**

Date of Disbursement: **06 / 14 / 2018**

Mailing Address: **330 Mounts Corner Drive**

City: **Freehold** State: **NJ** Zip Code: **07728**

Purpose of Disbursement: **Transfer to Committee** Category/Type: **008**

Candidate Name: **Richard Pezzullo**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C 00680249**

Amount of Each Disbursement this Period: **500.00**

Memo Item

C.

Full Name (Last, First, Middle Initial): _____

Date of Disbursement: **M M / D D / Y Y Y Y**

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____ Category/Type: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C** _____

Amount of Each Disbursement this Period: _____

Memo Item

SUBTOTAL of Disbursements This Page (optional) ... **1,500**

TOTAL This Period (last page this line number only) ... **1,500**

201808160200690741

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **Pezzullo for Senator**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election:
Richard J. Pezzullo			<input type="checkbox"/> Primary
Mailing Address 250 Stonehill Road			<input checked="" type="checkbox"/> General
City Freehold		State NJ	<input type="checkbox"/> Other (specify) ▼
ZIP Code 07728		<input checked="" type="checkbox"/> Personal Funds of the Candidate	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100,000.00	100,000.00	Zero - Paid in full

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	12 / 28 / 2018	11 / 06 / 2018	12.0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)...	▶ Zero on this page
TOTALS This Period (last page in this line only) ..	▶ <input type="text"/>

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

201808160200690742

SCHEDULE C (FEC Form 3)

LOANS

NAME OF COMMITTEE (In Full) **Pezzullo for Senator**

LOAN SOURCE Full Name (Last, First, Middle Initial)	<input type="checkbox"/> Memo Item	Election:
Richard J. Pezzullo		<input type="checkbox"/> Primary
Mailing Address		<input checked="" type="checkbox"/> General
250 Stonehill Road		<input type="checkbox"/> Other (specify) ▼
City	State	ZIP Code
Freehold	NJ	07728
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15,000.00	zero	15,000

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	05 / 01 / 2014	12 / 31 / 2018	zero % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)...	.. ▶ 15,000.00
TOTALS This Period (last page in this line only) ▶ 15,000.00

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

201808160200690743

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

PRIORITY MAIL EXPRESS

FASTEST SERVICE



July 2013 OD: 12.5 x 9

10001000006



USED INTERNATIONAL CUSTOMS DECLARATIO LABEL MAY BE REQUIRED

WITH BALL POINT PEN ON HARD SURFACE TO MAKE

CUSTOMER USE ONLY

FROM: (PLEASE PRINT)

PHONE () () () () () ()

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature. OR 2) Purchases additional insurance. OR 3) Purchases COD service. OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

No Saturday Delivery (delivered next business day)
Sunday/Holiday Delivery Required (additional fee, where available)
10:30 AM Delivery Required (additional fee, where available)
*Relay to USPS.com or local Post Office for availability.

TO: (PLEASE PRINT)

PHONE () () () () () ()

ZIP+4® (U.S. ADDRESSES ONLY)

For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811. \$100.00 Insurance Included.

Screened by CASI Senate Post Office AUG 15 2018

ORIGIN (POSTAL SERVICE USE ONLY)

1-Day

2-Day

Military

DPO

PO ZIP Code Scheduled Delivery Date (MM/DD/YY) Postage \$ 21.70

Date Accepted (MM/DD/YY) Scheduled Delivery Time 10:30 AM Delivery Fee \$ COD Fee \$

Time Accepted 10:26 AM Return Receipt Fee \$ Live Animal Transportation Fee \$

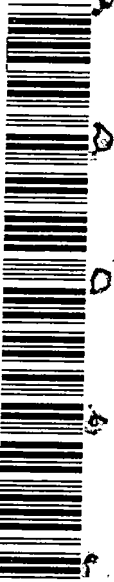
Special Handling/Fragile Sunday/Holiday Premium Fee \$ Total Postage & Fees \$ 24.70

Weight lbs. 1.75 Flat Fee \$ Acceptance Employee Initials \$

DELIVERY (POSTAL SERVICE USE ONLY) Delivery Attempt (MM/DD/YY) Time Employee Signature

Delivery Attempt (MM/DD/YY) Time Employee Signature

Label 11-B, OCTOBER 2018 PSN 7890-02-000-9996 3-ADDRESSEE COPY



E077308800US

E077308800US



PRIORITY MAIL EXPRESS™



1007

20013

U.S. POSTAGE PAID MANALAPAN, NJ AUG 13 18 AMOUNT \$24.70 R2304N116925-05

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UNITED STATES POSTAL SERVICE

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 8/13/18
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

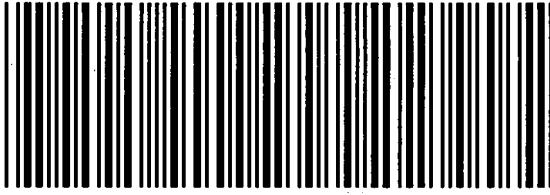
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

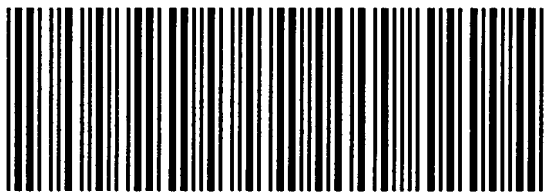
PREPARER BP DATE PREPARED 8/16/18

201808160200690745



SEN PATCH

201808160200690746



SEN PATCH