

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 225  
 Check if different than previously reported. (ACC) Colonia NJ 07067

2. **FEC IDENTIFICATION NUMBER** C C00444224 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY STATE ZIP CODE STATE DISTRICT  
NJ 07

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 M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
05 / 15 / 2014 through 06 / 30 / 2014

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 RONALD GRAVINO

Signature of Treasurer RONALD GRAVINO [Electronically Filed] Date M M / D D / Y Y Y Y  
09 / 05 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Lance for Congress**

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

	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))....	112841.00	832268.61
(b) Total Contribution Refunds (from Line 20(d)) .....	2300.00	2675.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	110541.00	829593.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	108334.70	583415.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	1000.00	2500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	107334.70	580915.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	387246.70	
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).....	70082.54	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Lance for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27837.00	329517.14
(ii) Unitemized.....	4004.00	51501.47
(iii) TOTAL of contributions from individuals ▶	31841.00	381018.61
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	81000.00	451250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	112841.00	832268.61
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	1000.00	2500.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	113841.00	834768.61

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	108334.70	583415.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	800.00	1175.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2300.00	2675.00
21. OTHER DISBURSEMENTS .....	5000.00	76727.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	115634.70	662817.05

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	389040.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	113841.00
25. SUBTOTAL (add Line 23 and Line 24).....	502881.40
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	115634.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	387246.70

**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 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ruth Bauer**

Mailing Address 11 South Street

City Somerville State NJ Zip Code 08876-2903

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

Name of Employer Self Employed Occupation Advertisement

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **810.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : 40711.C9196**

Amount of Each Receipt this Period  
 Receipt **50.00**

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

Mailing Address 264 Silver Lake Drive

City Blairstown State NJ Zip Code 07826

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9178**

Amount of Each Receipt this Period  
 Receipt **1000.00**

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

Mailing Address 232 Highfield Lane

City Nutley State NJ Zip Code 07110-2448

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40630.C9116**

Amount of Each Receipt this Period  
 Receipt **500.00**

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

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

**1550.00**

**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 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bob Benjamin**

Mailing Address 4 Tuccamirgan Rd

City State Zip Code  
Flemington NJ 08822

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

Name of Employer Occupation  
Flemington Furs Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2014

**Transaction ID : 40520.C8996**

Amount of Each Receipt this Period  
1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Susie Boyce**

Mailing Address 5 Springdale Lane

City State Zip Code  
Warren NJ 07059-7138

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

Name of Employer Occupation  
Self Employed Genealogist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2014

**Transaction ID : 40630.C9146**

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 14 Whitewood Drive

City State Zip Code  
Summit NJ 07901-4139

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

Name of Employer Occupation  
Grinsper Consulting Senior Consulnt

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
230.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2014

**Transaction ID : 40630.C9050**

Amount of Each Receipt this Period  
50.00

Receipt

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

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

1550.00

**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 7 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James Brady**

Mailing Address **PO Box 351**

City **Gladstone** State **NJ** Zip Code **07934-0351**

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

Name of Employer **Self Employed** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : 40630.C9054**

Amount of Each Receipt this Period  
**250.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**James Brenn**

Mailing Address **7 Laurel Ct**

City **Branchburg** State **NJ** Zip Code **08876**

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

Name of Employer **Self Employed** Occupation **Business Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : 40520.C8995**

Amount of Each Receipt this Period  
**250.00**

Receipt

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

Mailing Address **24 W 46th Street, Apt. 3**

City **New York** State **NY** Zip Code **10036**

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

Name of Employer **Self Employed** Occupation **Business Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : 40531.C9026**

Amount of Each Receipt this Period  
**250.00**

Receipt

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

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 8 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bilal Ciftci**

Mailing Address **24 Lacayette Circle**

City **Totowa** State **NJ** Zip Code **07512**

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

Name of Employer **Self Employed** Occupation **IT Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2850.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : 40531.C9025**

Amount of Each Receipt this Period  
**250.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Grover Connell**

Mailing Address **200 Connell Drive**

City **Berkeley Heights** State **NJ** Zip Code **07922-2805**

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

Name of Employer **The Connell Company** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40705.C9175**

Amount of Each Receipt this Period  
**2500.00**

Receipt

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

Mailing Address **13 Downstream Dr**

City **Flanders** State **NJ** Zip Code **07836-9568**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2635.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2014**

**Transaction ID : 40630.C9110**

Amount of Each Receipt this Period  
**135.00**

Receipt

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

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

**2885.00**

**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 9 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Kamin**

Mailing Address 13 Downstream Dr

City Flanders State NJ Zip Code 07836-9568

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

Name of Employer Kamin Consulting Group Occupation Sole Proprietor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2635.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : 40630.C9112**

Amount of Each Receipt this Period  
**135.00**

Memo  
**[MEMO ITEM]**  
 Partnership->Kamin Consulting PARTNERSHIP

**B.** Full Name (Last, First, Middle Initial)  
**Huseyin Copur**

Mailing Address 14 Virginia St

City Tenafly State NJ Zip Code 07670-1645

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

Name of Employer Physician Occupation First Choice OBGYN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 40520.C8991**

Amount of Each Receipt this Period  
**250.00**

Receipt

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

Mailing Address PO Box 100

City Cranford State NJ Zip Code 07016-0100

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

Name of Employer Reel -Strong Fuel Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9070**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

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

**750.00**

**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 10 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marion Crecco**

Mailing Address 4 Claridge Dr., Apt 503

City: Verona State: NJ Zip Code: 07044

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 03 / 2014

**Transaction ID : 40630.C9133**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 24 Timberwick Drive

City: Flemington State: NJ Zip Code: 08822-5515

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

Name of Employer: Creter Vault Corp. Occupation: Business Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 6000.00

Date of Receipt: 05 / 20 / 2014

**Transaction ID : 40520.C8989**

Amount of Each Receipt this Period: 2000.00

Receipt

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

Mailing Address 43 Delevan Street

City: Lambertville State: NJ Zip Code: 08530-2011

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

Name of Employer: Rutgers University Occupation: Student/Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2075.00

Date of Receipt: 06 / 13 / 2014

**Transaction ID : 40630.C9100**

Amount of Each Receipt this Period: 75.00

Receipt

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

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

2175.00

**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 11 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eileen Donohue**

Mailing Address 701 S Branch Dr

City	State	Zip Code
Whitehouse Station	NJ	08889-3231

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : 40630.C9084**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 75.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Conor Fennessy**

Mailing Address 50 Elm St

City	State	Zip Code
Lambertville	NJ	08530-1511

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

Name of Employer	Occupation
NJ Apartment Assoc.	VP Government Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 40630.C9048**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Receipt

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

Mailing Address 38 Youngs Road

City	State	Zip Code
Basking Ridge	NJ	07920-4033

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

Name of Employer	Occupation
Donaldson, Lufkin & Jenrte	Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 40903.C9249**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

Receipt

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

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

\_\_\_\_\_ 575.00

\_\_\_\_\_

**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 12 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Daniel Flatley**

Mailing Address 38 Youngs Road

City Basking Ridge State NJ Zip Code 07920-4033

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

Name of Employer Donaldson, Lufkin & Jennrte Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 40520.C8994**

Amount of Each Receipt this Period  
600.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**James Fox**

Mailing Address 7 Haven Hill Rise

City Flemington State NJ Zip Code 08822-5939

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
470.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 05 / 2014

**Transaction ID : 40630.C9077**

Amount of Each Receipt this Period  
120.00

Receipt

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

Mailing Address 260 Prospect Street, #17

City Westfield State NJ Zip Code 07090

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40630.C9042**

Amount of Each Receipt this Period  
75.00

Receipt

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

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

795.00

**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 13 OF 67
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>William Fritsche</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 13 / 2014
Mailing Address 65 Airport Road		<b>Transaction ID : 40630.C9105</b>
City Pittstown	State NJ	Zip Code 08867
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 285.00	
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 285.00	

Full Name (Last, First, Middle Initial) <b>Alfred Gaburo</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 94		<b>Transaction ID : 40520.C8988</b>
City Blawenburg	State NJ	Zip Code 08054
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Public Affairs Group	Occupation Consultant	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) <b>Brandi Harkins</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 03 / 2014
Mailing Address 8 Marlow Drive		<b>Transaction ID : 40630.C9134</b>
City Califon	State NJ	Zip Code 07830
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Full House Events	Occupation Founder	Receipt
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1785.00
<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: (check only one)	PAGE 14 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Heimgartner**

Mailing Address 15 Airport Raod

City State Zip Code  
Pittstown NJ 08867

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

Name of Employer Occupation  
Best Transportation LLC Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2014

**Transaction ID : 40630.C9092**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Gregory Hillsboro Twsp.Gille**

Mailing Address 401 Conover Dr.

City State Zip Code  
Hillsborough NH 08844

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

Name of Employer Occupation  
Hillsboro Twsp. Board of Education

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : 40630.C9101**

Amount of Each Receipt this Period  
150.00

Receipt

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

Mailing Address 7023 Deverlux Circle Drive

City State Zip Code  
Alexandria VA 22315

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

Name of Employer Occupation  
National Oil & Heat Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2014

**Transaction ID : 40630.C9068**

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

1650.00

**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 15 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth Johnson**

Mailing Address 29 Ferry Road

City Stockton State NJ Zip Code 08559

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : 40630.C9144**

Amount of Each Receipt this Period  
 Receipt 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Theodore Koven**

Mailing Address 6 Sawmill Road

City Lebanon State NJ Zip Code 08833-4618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : 40705.C9157**

Amount of Each Receipt this Period  
 Receipt 250.00

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

Mailing Address 35 Kuhl Road

City Flemington State NJ Zip Code 08822-6801

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

Name of Employer Kuhl Corporation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
410.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40630.C9040**

Amount of Each Receipt this Period  
 Receipt 60.00

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

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

560.00

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

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

FOR LINE NUMBER: PAGE 16 OF 67  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Kuhl**

Mailing Address 35 Kuhl Road

City State Zip Code  
Flemington NJ 08822

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

Name of Employer Occupation  
Kuhl Corp. Manufacturer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : 40630.C9086**

Amount of Each Receipt this Period  
 Receipt 60.00

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Kuhl**

Mailing Address 61 Kuhl Road

City State Zip Code  
Flemington NJ 08822-6801

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

Name of Employer Occupation  
Kuhl Corporation COO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 13 / 2014

**Transaction ID : 40630.C9104**

Amount of Each Receipt this Period  
 Receipt 150.00

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

Mailing Address 81 Hobart Avenue

City State Zip Code  
Summit NJ 07901

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

Name of Employer Occupation  
DCH Management Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9125**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

1210.00

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

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

FOR LINE NUMBER: PAGE 17 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dorrance Lance**

Mailing Address 438 Alloway Friesburg Rd.

City State Zip Code  
Bridgeton NJ 08302

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : 40630.C9046**

Amount of Each Receipt this Period  
75.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Ruth Lipper**

Mailing Address 100 Fernwood Road

City State Zip Code  
Summit NJ 07901

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2312.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : 40705.C9170**

Amount of Each Receipt this Period  
62.00

Receipt

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

Mailing Address PO Box 129

City State Zip Code  
Stanton NJ 08885

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

Name of Employer Occupation  
Stanton Concepts, Inc. Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40531.C9020**

Amount of Each Receipt this Period  
50.00

Receipt

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

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

187.00

**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 18 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lorraine Luciano**

Mailing Address 95 Bissell Road

City Lebanon State NJ Zip Code 08833-4434

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : 40630.C9082**

Amount of Each Receipt this Period  
 Receipt 150.00

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

Mailing Address 39 Court St

City Flemington State NJ Zip Code 08822-1315

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

Name of Employer Hunterdon County Occupation County Clerk

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9126**

Amount of Each Receipt this Period  
 Receipt 150.00

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

Mailing Address 14 Edgecomb Rd.

City Binghamton State NY Zip Code 13905

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
475.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : 40630.C9097**

Amount of Each Receipt this Period  
 Receipt 275.00

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

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

575.00

**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 19 OF 67
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>Edward Miller</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 3 Robin Lane		<b>Transaction ID : 40520.C8990</b>
City High Bridge	State NJ	Zip Code 08829-1009
FEC ID number of contributing federal political committee.	C	
Name of Employer Fuel Merchants Assoc. of NJ	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	
		Amount of Each Receipt this Period 1000.00 Receipt

Full Name (Last, First, Middle Initial) <b>Ren Mortara</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address Country Side Plaza Inc 79 US HWY 202 Suite 101		<b>Transaction ID : 40520.C8998</b>
City Ringoes	State NJ	Zip Code 08551
FEC ID number of contributing federal political committee.	C	
Name of Employer Country Side Plaza	Occupation Builder	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	
		Amount of Each Receipt this Period 300.00 Receipt

Full Name (Last, First, Middle Initial) <b>Fahri Ozturk</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 355 Prospect		<b>Transaction ID : 40531.C9024</b>
City Stewartville	State NJ	Zip Code 08886
FEC ID number of contributing federal political committee.	C	
Name of Employer Self Employed	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2450.00	
		Amount of Each Receipt this Period 250.00 Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<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: (check only one)	PAGE 20 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Pierson**

Mailing Address **PO Box 644**

City **Peapack** State **NJ** Zip Code **07977-0644**

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

Name of Employer **Dixon Bros. Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : 40630.C9073**

Amount of Each Receipt this Period  
**1000.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Peter Pizzuto**

Mailing Address **223 Harmon Cove Tower #223**

City **Secaucus** State **NJ** Zip Code **07094**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40711.C9188**

Amount of Each Receipt this Period  
**1500.00**

Receipt

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

Mailing Address **1 W Broad St**

City **Hopewell** State **NJ** Zip Code **08525-1901**

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

Name of Employer **Hopewell Pharm.** Occupation **Pharmacist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : 40630.C9095**

Amount of Each Receipt this Period  
**150.00**

Receipt

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

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

**2650.00**

**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 21 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence Ray**

Mailing Address 17 Tanglewood Lane

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer RPC Inc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9067**

Amount of Each Receipt this Period  
 Receipt 500.00

**B.** Full Name (Last, First, Middle Initial)  
**James Robinson**

Mailing Address 11 Borelle Square

City Parlin State NJ Zip Code 08859-2301

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

Name of Employer EMBARQ Occupation Public Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 12 / 2014

**Transaction ID : 40630.C9099**

Amount of Each Receipt this Period  
 Receipt 75.00

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

Mailing Address PO Box 91

City Oldwick State NJ Zip Code 08858-0091

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

Name of Employer Drinker/Biddle Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : 40527.C9008**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

1575.00

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

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

FOR LINE NUMBER: PAGE 22 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Salisbury**

Mailing Address 1 W Main Street

City Chester State NJ Zip Code 07930-2407

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

Name of Employer Mohawk Oil co. Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9072**

Amount of Each Receipt this Period  
 Receipt 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy 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 Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : 40531.C9030**

Amount of Each Receipt this Period  
 Receipt 400.00

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

Mailing Address PO Box 111

City Oldwick State NJ Zip Code 08858-0111

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40531.C9023**

Amount of Each Receipt this Period  
 Receipt 25.00

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

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

925.00

**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 23 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steven Sireci**

Mailing Address 90 Rohill Road

City Hillsborough State NJ Zip Code 08844

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

Name of Employer Bracco Diagnostics Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **635.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : 40630.C9088**

Amount of Each Receipt this Period  
**135.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**JD Stem**

Mailing Address PO Box 66

City Milford State NJ Zip Code 08848-0066

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

Name of Employer Stem Brothers Inc. Occupation Business Exec.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9069**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address PO Box 619

City Milford State NJ Zip Code 08848-0619

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

Name of Employer Stem Brothers Inc. Occupation Business Exec.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9066**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

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

**1135.00**

**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 24 OF 67
	<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	

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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roy Tanzman**

Mailing Address 4 Talia Road

City Kendall Park State NJ Zip Code 08824-1705

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

Name of Employer Wilentz, Goldman & Spitzer Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40630.C9043**

Amount of Each Receipt this Period  
**75.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Charles Theil**

Mailing Address 1356 Plymouth Rd.

City Bridgewater State NJ Zip Code 08807

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

Name of Employer Transitor Device Inc. Occupation Business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : 40705.C9171**

Amount of Each Receipt this Period  
**250.00**

Receipt

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

Mailing Address 48 Hardscrabble Rd.

City Flemington State NJ Zip Code 08822

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

Name of Employer Tirpok Group Inc. Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40630.C9034**

Amount of Each Receipt this Period  
**150.00**

Receipt

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

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

**475.00**

**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 OF 67
	<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)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Torpey**

Mailing Address 4 Deerpath Road

City State Zip Code  
Flemington NJ 08822-7022

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

Name of Employer Occupation  
1868 Public Affairs Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : 40630.C9108**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Germaine Trabert**

Mailing Address 930 Minisink Way

City State Zip Code  
Westfield NJ 07090-3723

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

Name of Employer Occupation  
Community Partners Bank Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 19 / 2014

**Transaction ID : 40630.C9041**

Amount of Each Receipt this Period  
150.00

Receipt

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

Mailing Address PO Box 189

City State Zip Code  
Far Hills NJ 07931-0189

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

Name of Employer Occupation  
Paul J. Vallone MD Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
205.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2014

**Transaction ID : 40630.C9053**

Amount of Each Receipt this Period  
130.00

Receipt

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

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

780.00

**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 26 OF 67
	<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)  
**Lance for Congress**

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

Mailing Address 32 Chalfonte Drive

City: Lebanon State: NJ Zip Code: 08833

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 800.00

Date of Receipt: 06 / 03 / 2014

**Transaction ID : 40630.C9065**

Amount of Each Receipt this Period: 800.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Joanna Vegh**

Mailing Address 231 Brainards Rd

City: Phillipsburg State: NJ Zip Code: 08865-9588

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 15 / 2014

**Transaction ID : 40630.C9047**

Amount of Each Receipt this Period: 100.00

Receipt

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

Mailing Address 47 Parsonage Lot Road

City: Lebanon State: NJ Zip Code: 08833-4612

FEC ID number of contributing federal political committee: C

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 200.00

Date of Receipt: 06 / 03 / 2014

**Transaction ID : 40630.C9132**

Amount of Each Receipt this Period: 100.00

Receipt

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Walters**

Mailing Address 47 Parsonage Lot Road

City Lebanon State NJ Zip Code 08833-4612

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 11 / 2014**

**Transaction ID : 40630.C9083**

Amount of Each Receipt this Period  
**100.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Myra Wolgamuth**

Mailing Address 163 Black River Rd

City Long Valley State NJ Zip Code 07853-3066

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : 40630.C9039**

Amount of Each Receipt this Period  
**150.00**

Receipt

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

Mailing Address 1259 Evergreen Drive

City Bridgewater State NJ Zip Code 08807

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

Name of Employer Woolley Fuel Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : 40630.C9071**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

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

**750.00**

**27837.00**

**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 28 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Abbott Laboratories Employee PAC**

Mailing Address 100 Abbott Park Road

City State Zip Code  
Abbott Park IL 60064

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : 40630.C9155**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

Mailing Address 509 2nd St NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40522.C9003**

Amount of Each Receipt this Period  
 Receipt 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Action Comm. For Rural Electrification**

Mailing Address 4301 Wilson Blvd

City State Zip Code  
Arlington VA 22203-1867

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40519.C8987**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

4000.00

**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 29 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Advanced Medical Technology PAC**

Mailing Address 701 Pennsylvania Avenue, NW Ste.

City Washington State DC Zip Code 20004-2654

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : 40630.C9156**

Amount of Each Receipt this Period  
 Receipt 1700.00

**B.** Full Name (Last, First, Middle Initial)  
**ALTICOR PAC**

Mailing Address 7575 Fulton Street

City Ada State MI Zip Code 49355

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9180**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Academy Of Dermatology PAC**

Mailing Address 1445 New York Avenue, NW, Suite 80

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9075**

Amount of Each Receipt this Period  
 Receipt 3000.00

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

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

5700.00

**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 30 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Avenue, NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9011**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Express PAC**

Mailing Address 801 Pennsylvania Avenue, NW Ste 65

City Washington State DC Zip Code 20004-2673

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9012**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Principles PAC**

Mailing Address 20533 Biscayne Blvd., #250

City Miami State FL Zip Code 33180

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9181**

Amount of Each Receipt this Period  
 Receipt 500.00

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

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

2500.00

**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 31 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ASPS PlastyPAC**

Mailing Address 444 E Algonquin Rd

City State Zip Code  
Arlington Heights IL 60005-4654

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9174**

Amount of Each Receipt this Period  
 Receipt 3000.00

**B.** Full Name (Last, First, Middle Initial)  
**Becton. Dickinson And Co., PAC**

Mailing Address 1 Becton Drive

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9182**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

Mailing Address 1201 15th Street, NW

City State Zip Code  
Washington DC 20005-2842

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9010**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

6000.00

**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 32 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Celgene Corporation PAC**

Mailing Address 86 Morris Avenue

City State Zip Code  
Summit NJ 07901

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40522.C9002**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation PAC**

Mailing Address 1701 John F Kennedy Blvd

City State Zip Code  
Philadelphia PA 19103-2838

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9060**

Amount of Each Receipt this Period  
 Receipt 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Fred Brown Sheriff**

Mailing Address 16 Biser Road

City State Zip Code  
Flemington NJ 08822

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
135.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : 40630.C9093**

Amount of Each Receipt this Period  
 Receipt 75.00

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

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

3075.00

**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 33 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Simon For Assembly**

Mailing Address PO Box 878

City State Zip Code  
Flemington NJ 08822-5535

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40630.C9102**

Amount of Each Receipt this Period

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Covidien PAC**

Mailing Address 201 8th Street, NW STE 620

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40630.C9096**

Amount of Each Receipt this Period

Receipt

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

Mailing Address 601 Pennsylvania Ave NW  
South Bldg., Suite 600

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40630.C9059**

Amount of Each Receipt this Period

Receipt

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

**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 34 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cummins Inc., PAC**

Mailing Address 601 Pennsylvania Ave., NW  
North Bldg., STE 625

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9063**

Amount of Each Receipt this Period  
 Receipt 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Dealers Election Action Committee**

Mailing Address 8400 Westpark Drive

City Mc Lean State VA Zip Code 22102-5116

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : 40529.C9019**

Amount of Each Receipt this Period  
 Receipt 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**DIRECTTV GROUP, INC. PAC**

Mailing Address 901 F Street, NW Suite 600

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40711.C9192**

Amount of Each Receipt this Period  
 Receipt 2500.00

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

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

5500.00

**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 35 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Doherty For Senate Committee**

Mailing Address 5 Mountain Ridge Drive

City Oxford State NJ Zip Code 07863

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9151**

Amount of Each Receipt this Period  
 Receipt 150.00

Receipt 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Experian North America, Inc. PAC**

Mailing Address 475 Anton Blvd

City Costa Mesa State CA Zip Code 92626-7037

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : 40711.C9197**

Amount of Each Receipt this Period  
 Receipt 2000.00

Receipt 3000.00

**C.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation PAC**

Mailing Address 5959 Las Colinas Blvd

City Irving State TX Zip Code 75039-4202

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9064**

Amount of Each Receipt this Period  
 Receipt 3000.00

Receipt 5000.00

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

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

5150.00

**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 36 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eye Of The Tiger PAC**

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40711.C9191**

Amount of Each Receipt this Period  
**2500.00**

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Eye Of The Tiger PAC**

Mailing Address **PO Box 2485**

City **Springfield** State **VA** Zip Code **22152**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : 40711.C9190**

Amount of Each Receipt this Period  
**500.00**

Receipt

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

Mailing Address **76 S Main Street**

City **Akron** State **OH** Zip Code **44308-1817**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : 40630.C9153**

Amount of Each Receipt this Period  
**1000.00**

Receipt

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

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

**4000.00**

**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 37 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**IKARIA PAC**

Mailing Address 444 N Capitol Street, NW Ste. 83

City Washington	State DC	Zip Code 20001-1569
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40527.C9007**

Amount of Each Receipt this Period  
500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**IKARIA PAC**

Mailing Address 444 N Capitol Street, NW Ste. 83

City Washington	State DC	Zip Code 20001-1569
--------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40522.C9005**

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**International Union Of Oper.Engineers**

Mailing Address 1125 17th Street, NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9074**

Amount of Each Receipt this Period  
5000.00

Receipt

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

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

6000.00

**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 38 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Liuna PAC**

Mailing Address 905 16th Street, NW

City Washington State DC Zip Code 20006-1703

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9017**

Amount of Each Receipt this Period  
 Receipt 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**McKesson Corporation PAC**

Mailing Address 1 Post Street, 34th Floor

City San Francisco State CA Zip Code 94104

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : 40519.C8986**

Amount of Each Receipt this Period  
 Receipt 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**Medtronic Inc., PAC**

Mailing Address 950 F Street, NW Suite 500

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : 40630.C9080**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

11000.00

**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 39 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Air Traffic Controllers PAC**

Mailing Address 1325 Massachusetts Avenue, NW

City Washington State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9014**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Air Traffic Controllers PAC**

Mailing Address 1325 Massachusetts Avenue, NW

City Washington State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9013**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Air Traffic Controllers PAC**

Mailing Address 1325 Massachusetts Avenue, NW

City Washington State DC Zip Code 20005-4171

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 40528.C9015**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

3000.00

**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 40 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Assoc. PAC**

Mailing Address 1101 King Street, Suite 600

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : 40529.C9018**

Amount of Each Receipt this Period  
1500.00

Receipt

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

Mailing Address 25 Massachusetts Ave NW Ste 100

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : 40630.C9152**

Amount of Each Receipt this Period  
4000.00

Receipt

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

Mailing Address 1850 M Street, NW Suite 540

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9058**

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 41 OF 67  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Prudential Financial Inc. PAC**

Mailing Address 751 Broad Street

City Newark State NJ Zip Code 07102-3714

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40630.C9057**

Amount of Each Receipt this Period

Receipt

**B.** Full Name (Last, First, Middle Initial)  
**Republican Main Street PAC**

Mailing Address 1220 L Street, NW Ste. 100-263

City Washington State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40528.C9016**

Amount of Each Receipt this Period

Receipt

**C.** Full Name (Last, First, Middle Initial)  
**Republican Main Street PAC**

Mailing Address 1220 L Street, NW Ste. 100-263

City Washington State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : 40705.C9173**

Amount of Each Receipt this Period

Receipt

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

**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 42 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A. Sanofi-Aventis US Inc. Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 801 Pennsylvania Avenue NW  
Suite 725

City Washington State DC Zip Code 20004-3616

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9061**

Amount of Each Receipt this Period  
 Receipt 1000.00

**B. Scalise For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 2900 Clearview Pkw  
Suite 206

City Metairie State LA Zip Code 70006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40712.C9198**

Amount of Each Receipt this Period  
 Receipt 2000.00

**C. Scalise For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 2900 Clearview Pkw  
Suite 206

City Metairie State LA Zip Code 70006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40711.C9189**

Amount of Each Receipt this Period  
 Receipt 2000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 43 OF 67  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**The Chubb Corporation PAC**

Mailing Address 15 Mountainview Road

City Warren State NJ Zip Code 07059-6711

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : 40522.C9004**

Amount of Each Receipt this Period  
 Receipt 1000.00

Receipt 8000.00

**B.** Full Name (Last, First, Middle Initial)  
**The Williams Companies Inc., PAC**

Mailing Address 1627 I Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9172**

Amount of Each Receipt this Period  
 Receipt 1000.00

Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Tuesday Group PAC**

Mailing Address PO Box 11586

City Washington State DC Zip Code 20008-0786

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9177**

Amount of Each Receipt this Period  
 Receipt 2500.00

Receipt 10000.00

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

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

4500.00

**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 44 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UPS PAC**

Mailing Address 643 W 43rd St

City State Zip Code  
New York NY 10036-1912

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 40630.C9062**

Amount of Each Receipt this Period  
 Receipt 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Wireless PAC**

Mailing Address 20 Independence Boulevard

City State Zip Code  
Warren NJ 07059-2731

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40705.C9183**

Amount of Each Receipt this Period  
 Receipt 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Zimmer Inc. Better Govt. Committee PAC**

Mailing Address PO Box 708

City State Zip Code  
Warsaw IN 46581

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : 40630.C9140**

Amount of Each Receipt this Period  
 Receipt 1000.00

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

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

4500.00

81000.00

**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 45 OF 67
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shea Sodiska & Carberry For Council**

Mailing Address 10 Water St  
10 Water St

City Clinton State NJ Zip Code 08809-

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 40706.C9184**

Amount of Each Receipt this Period  
1000.00

Offsets to Operating Expenditu

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

1000.00

**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 46 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ronald Gravino Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO Box 225			Amount of Each Disbursement this Period 8961.05 <b>Transaction ID : 40706.E1926</b>
City Colonia	State NJ	Zip Code 07067-0225	
Purpose of Disbursement Office Expense		Category/ Type	OFFICE EXPENSE
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>B. Ronald Gravino Consulting</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 225			Amount of Each Disbursement this Period 91.77 <b>Transaction ID : 40630.E1906</b>
City Colonia	State NJ	Zip Code 07067-0225	
Purpose of Disbursement Courier		Category/ Type	COURIER
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>C. Hummel Distributing Corp.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 850 Springfield Rd			Amount of Each Disbursement this Period 8692.22 <b>Transaction ID : 40531.E1873</b>
City Union	State NJ	Zip Code 07083-8614	
Purpose of Disbursement Postage		Category/ Type	POSTAGE
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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8961.05
<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)	PAGE 47 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Hummel Distributing Corp.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 850 Springfield Rd			Amount of Each Disbursement this Period 10389.08 <b>Transaction ID : 40531.E1864</b>
City Union	State NJ	Zip Code 07083-8614	
Purpose of Disbursement Postage		Category/ Type	POSTAGE
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>B. Jamestown Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 5 Mapleton Road, Ste. 300			Amount of Each Disbursement this Period 6191.10 <b>Transaction ID : 40531.E1879</b>
City Princeton	State NJ	Zip Code 08540-9646	
Purpose of Disbursement Media		Category/ Type	MEDIA
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>C. Jamestown Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 5 Mapleton Road, Ste. 300			Amount of Each Disbursement this Period 16079.34 <b>Transaction ID : 40531.E1865</b>
City Princeton	State NJ	Zip Code 08540-9646	
Purpose of Disbursement Media		Category/ Type	MEDIA
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: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	32659.52
<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)	PAGE 48 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jamestown Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 5 Mapleton Road, Ste. 300			Amount of Each Disbursement this Period 39515.64
City Princeton	State NJ	Zip Code 08540-9646	Transaction ID : 40630.E1918
Purpose of Disbursement Media and Production		Category/ Type	
Candidate Name			MEDIA AND PRODUCTION
Office Sought:	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>B. Townsend Group</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1006 Pendleton St			Amount of Each Disbursement this Period 6453.30
City Alexandria	State VA	Zip Code 22314-3202	Transaction ID : 40630.E1912
Purpose of Disbursement Fundraising Management		Category/ Type	
Candidate Name			FUNDRAISING MANAGEMENT
Office Sought:	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>c. Techdonations</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1101 Pennsylvania Ave. N.W. FL6			Amount of Each Disbursement this Period 4.27
City Washington	State DC	Zip Code 20004-	Transaction ID : 40522.E1861
Purpose of Disbursement Credit Card Fees		Category/ Type	
Candidate Name			CREDIT CARD FEES
Office Sought:	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45973.21
<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)	PAGE 49 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tusk Productions LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014		
Mailing Address 38 Lakewood Dr.			Amount of Each Disbursement this Period 4176.40		
City Denville	State NJ	Zip Code 07834-	Transaction ID : 40630.E1917		
Purpose of Disbursement		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	WEBSITE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Prosper Group</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014		
Mailing Address 435 East Main St. Ste. 250			Amount of Each Disbursement this Period 1771.63		
City Greenwood	State IN	Zip Code 46163-	Transaction ID : 40630.E1885		
Purpose of Disbursement Website		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	WEBSITE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) <b>c. Verbatim Services</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014		
Mailing Address PO BOX 784			Amount of Each Disbursement this Period 700.85		
City West Caldwell	State NJ	Zip Code 07007-	Transaction ID : 40630.E1916		
Purpose of Disbursement Printing		Category/ Type			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6648.88
<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)	PAGE 50 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Verbatim Services</b>		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
Mailing Address PO BOX 784		Amount of Each Disbursement this Period
City West Caldwell State NJ Zip Code 07007-		<input type="text" value="652.70"/>
Purpose of Disbursement Printing		<b>Transaction ID : 40630.E1908</b>
Candidate Name		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)	PRINTING
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Central Liquors</b>		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
Mailing Address 781 Central Avenue		Amount of Each Disbursement this Period
City Westfield State NJ Zip Code 07090-		<input type="text" value="261.72"/>
Purpose of Disbursement Event Expense		<b>Transaction ID : 40630.E1887</b>
Candidate Name		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)	EVENT EXPENSE
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Transaxt</b>		<input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
Mailing Address 190 Monroe Ave, Suite 500		Amount of Each Disbursement this Period
City Grand Rapids State MI Zip Code 49503-		<input type="text" value="120.58"/>
Purpose of Disbursement Credit Card Fee		<b>Transaction ID : 40531.E1880</b>
Candidate Name		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)	CREDIT CARD FEE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="1035.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**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 51 OF 67	
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. Transact</b>		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address 190 Monroe Ave, Suite 500		<input type="text"/> 05 / <input type="text"/> 28 / <input type="text"/> 2014
City	State	Zip Code
Grand Rapids	MI	49503-
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Credit Card Fee		<input type="text"/> 39.34
Candidate Name	Category/Type	<b>Transaction ID : 40531.E1863</b>
Office Sought:	Disbursement For:	CREDIT CARD FEE
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Transact</b>		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address 190 Monroe Ave, Suite 500		<input type="text"/> 06 / <input type="text"/> 03 / <input type="text"/> 2014
City	State	Zip Code
Grand Rapids	MI	49503-
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Credit Card Fee		<input type="text"/> 47.24
Candidate Name	Category/Type	<b>Transaction ID : 40630.E1913</b>
Office Sought:	Disbursement For:	CREDIT CARD FEE
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. Transact</b>		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address 190 Monroe Ave, Suite 500		<input type="text"/> 06 / <input type="text"/> 10 / <input type="text"/> 2014
City	State	Zip Code
Grand Rapids	MI	49503-
Purpose of Disbursement	<input type="text"/>	Amount of Each Disbursement this Period
Credit Card Fee		<input type="text"/> 12.36
Candidate Name	Category/Type	<b>Transaction ID : 40630.E1910</b>
Office Sought:	Disbursement For:	CREDIT CARD FEE
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text"/> 98.94
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**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 52 OF 67			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. <b>Transact</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		17		2014
M M	/	D D	/	Y Y Y Y									
06		17		2014									
Mailing Address 190 Monroe Ave, Suite 500		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Grand Rapids</td> <td>MI</td> <td>49503-</td> </tr> </table>		City	State	Zip Code	Grand Rapids	MI	49503-	<table border="1"> <tr> <td>4.50</td> </tr> </table>		4.50			
City	State	Zip Code											
Grand Rapids	MI	49503-											
4.50													
Purpose of Disbursement Credit Card Fee		Transaction ID : 40630.E1904											
Candidate Name		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:		CREDIT CARD FEE											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. <b>Transact</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		30		2014
M M	/	D D	/	Y Y Y Y									
06		30		2014									
Mailing Address 190 Monroe Ave, Suite 500		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Grand Rapids</td> <td>MI</td> <td>49503-</td> </tr> </table>		City	State	Zip Code	Grand Rapids	MI	49503-	<table border="1"> <tr> <td>37.48</td> </tr> </table>		37.48			
City	State	Zip Code											
Grand Rapids	MI	49503-											
37.48													
Purpose of Disbursement Credit Card Fee		Transaction ID : 40706.E1924											
Candidate Name		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:		CREDIT CARD FEE											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. <b>National Right To Life Committee</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		19		2014
M M	/	D D	/	Y Y Y Y									
05		19		2014									
Mailing Address 512 10th St., NW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20004-</td> </tr> </table>		City	State	Zip Code	Washington	DC	20004-	<table border="1"> <tr> <td>1300.00</td> </tr> </table>		1300.00			
City	State	Zip Code											
Washington	DC	20004-											
1300.00													
Purpose of Disbursement Direct Mail		Transaction ID : 40531.E1876											
Candidate Name		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:		DIRECT MAIL											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1341.98
<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)	PAGE 53 OF 67			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Ridge At Back Brook</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>11</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		11		2014			
M M	/	D D	/	Y Y Y Y												
06		11		2014												
Mailing Address 211 Wertsville Rd.			Amount of Each Disbursement this Period <table border="1"> <tr> <td>3461.45</td> </tr> </table> <b>Transaction ID : 40630.E1907</b>	3461.45												
3461.45																
City Ringoos	State NJ	Zip Code 08551-														
Purpose of Disbursement Event Cost	Candidate Name		<b>EVENT COST</b>													
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House		<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)	
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

Full Name (Last, First, Middle Initial) <b>B. American Express</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		21		2014			
M M	/	D D	/	Y Y Y Y												
05		21		2014												
Mailing Address PO Box 360001			Amount of Each Disbursement this Period <table border="1"> <tr> <td>1863.50</td> </tr> </table> <b>Transaction ID : 40531.E1871</b>	1863.50												
1863.50																
City Fort Lauderdale	State FL	Zip Code 33336-0001														
Purpose of Disbursement CREDIT CARD: SEE BELOW	Candidate Name		<b>CREDIT CARD: SEE BELOW</b>													
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House		<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)	
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

Full Name (Last, First, Middle Initial) <b>c. Staples</b>			Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	05		21		2014			
M M	/	D D	/	Y Y Y Y												
05		21		2014												
Mailing Address 225 E Broad St			Amount of Each Disbursement this Period <table border="1"> <tr> <td>174.94</td> </tr> </table> <b>Transaction ID : 40706.E1929</b>	174.94												
174.94																
City Westfield	State NJ	Zip Code 07090-														
Purpose of Disbursement Office Expense	Candidate Name		<b>[MEMO ITEM]</b> MEMO: OFFICE EXPENSE													
Office Sought: <table border="1"> <tr><td><input type="checkbox"/></td><td>House</td></tr> <tr><td><input type="checkbox"/></td><td>Senate</td></tr> <tr><td><input type="checkbox"/></td><td>President</td></tr> </table>	<input type="checkbox"/>	House		<input type="checkbox"/>	Senate	<input type="checkbox"/>	President	Disbursement For: <table border="1"> <tr><td><input type="checkbox"/></td><td>Primary</td><td><input type="checkbox"/></td><td>General</td></tr> <tr><td><input type="checkbox"/></td><td colspan="3">Other (specify)</td></tr> </table>		<input type="checkbox"/>	Primary	<input type="checkbox"/>	General	<input type="checkbox"/>	Other (specify)	
<input type="checkbox"/>	House															
<input type="checkbox"/>	Senate															
<input type="checkbox"/>	President															
<input type="checkbox"/>	Primary	<input type="checkbox"/>	General													
<input type="checkbox"/>	Other (specify)															
State: District:	Category/Type															

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>5324.94</td> </tr> </table>	5324.94
5324.94		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 54 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 700.74
City Dallas	State TX	Zip Code 75266-0108
Purpose of Disbursement Telecommunications	Category/ Type	
Candidate Name	Transaction ID : 40706.E1930	
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:	[MEMO ITEM] MEMO: TELECOMMUNICATIONS	

Full Name (Last, First, Middle Initial) <b>B. Rayburn Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 18788 Indp. & Capital St., SW		Amount of Each Disbursement this Period 61.00
City Washington	State DC	Zip Code 20515-
Purpose of Disbursement Meeting Exp	Category/ Type	
Candidate Name	Transaction ID : 40706.E1931	
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:	[MEMO ITEM] MEMO: MEETING EXP	

Full Name (Last, First, Middle Initial) <b>c. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 601 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 637.35
City Washington	State DC	Zip Code 20004-
Purpose of Disbursement Meeting Exp	Category/ Type	
Candidate Name	Transaction ID : 40706.E1932	
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:	[MEMO ITEM] MEMO: MEETING EXP	

<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)	PAGE 55 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Brittany Brinkman</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2014
Mailing Address PO Box 225		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40630.E1915</b>
City Colonia	State NJ	
Zip Code 07067-	Purpose of Disbursement Compliance	COMPLIANCE
Candidate Name	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>B. Mr. Sam Button</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 10 Glenbrook Drive		Amount of Each Disbursement this Period 380.00 <b>Transaction ID : 40630.E1902</b>
City Mendham	State NJ	
Zip Code 07945-	Purpose of Disbursement Door-To-Door Get-Out-the-Vote	DOOR-TO-DOOR GET-OUT-THE-VOTE
Candidate Name	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>c. Annette Corcoran</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2014
Mailing Address 30 Hillside Avenue		Amount of Each Disbursement this Period 975.00 <b>Transaction ID : 40630.E1920</b>
City Sayreville	State NJ	
Zip Code 08872-1153	Purpose of Disbursement compliance	COMPLIANCE
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1855.00
<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)	PAGE 56 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Alex Jacobs</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 1 White Oak Ridge Ct.			Amount of Each Disbursement this Period 375.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40630.E1895	
Purpose of Disbursement Door-to-Door Get-Out-the-Vote		Category/ Type	DOOR-TO-DOOR GET-OUT-THE-VOTE	
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>B. Mr. Tim Lewis</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 128 Cold Hill Road			Amount of Each Disbursement this Period 335.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40630.E1897	
Purpose of Disbursement Door-to-Door Get-Out-the-Vote		Category/ Type	DOOR-TO-DOOR GET-OUT-THE-VOTE	
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>c. Mr. Dylan Mcdevitt</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014	
Mailing Address 30 Aberdeen Drive			Amount of Each Disbursement this Period 309.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40531.E1877	
Purpose of Disbursement Temp Help		Category/ Type	TEMP HELP	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1019.00
<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)	PAGE 57 OF 67			
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Dylan Mcdevitt</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 30 Aberdeen Drive			Amount of Each Disbursement this Period 290.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40630.E1890	
Purpose of Disbursement Door-to-Door Get-Out-the-Vote		Category/ Type		
Candidate Name			DOOR-TO-DOOR GET-OUT-THE-VOTE	
Office Sought:	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>B. Kyle Mcdevitt</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 30 Aberdeen Drive			Amount of Each Disbursement this Period 240.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40630.E1892	
Purpose of Disbursement Door-to-Door Get-Out-the-Vote		Category/ Type		
Candidate Name			DOOR-TO-DOOR GET-OUT-THE-VOTE	
Office Sought:	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>C. Ms. Elisabeth Middleton</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 8 S Hill Court			Amount of Each Disbursement this Period 350.00	
City Morristown	State NJ	Zip Code 07960-	Transaction ID : 40630.E1903	
Purpose of Disbursement Door-to-door Get-Out-The-Vote		Category/ Type		
Candidate Name			DOOR-TO-DOOR GET-OUT-THE-VOTE	
Office Sought:	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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	880.00
<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)		PAGE 58 OF 67	
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sean Morris</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 57 Walsingham Rd.		Amount of Each Disbursement this Period 300.00
City Mendham	State NJ	
Zip Code 07945-	Purpose of Disbursement Door-to-Door Get-Out-the-Vote	<b>Transaction ID : 40630.E1894</b>
Candidate Name	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)	DOOR-TO-DOOR GET-OUT-THE-VOTE
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Glenn Mortimer</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 1152 Corrine Terr.		Amount of Each Disbursement this Period 1016.00
City Mountainside	State NJ	
Zip Code 07092-	Purpose of Disbursement Election Night Event	<b>Transaction ID : 40630.E1888</b>
Candidate Name	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)	ELECTION NIGHT EVENT
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. William Trotter Robinson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 28 Hampshire Drive		Amount of Each Disbursement this Period 250.00
City Mendham	State NJ	
Zip Code 07945-	Purpose of Disbursement Door-To-Door Get-Out-the-Vote	<b>Transaction ID : 40630.E1901</b>
Candidate Name	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)	DOOR-TO-DOOR GET-OUT-THE-VOTE
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1566.00
<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)	PAGE 59 OF 67			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Michael Sinzer</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2014	
Mailing Address 23 Gunther Street			Amount of Each Disbursement this Period 270.00	
City Mendham	State NJ	Zip Code 07945-	Transaction ID : 40630.E1896	
Purpose of Disbursement Door-to-Door Get-Out-the-Vote		Category/ Type		
Candidate Name		DOOR-TO-DOOR GET-OUT-THE-VOTE		
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>B. Verizon</b>			Date of Disbursement MM / DD / YYYY 05 / 19 / 2014	
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 39.30	
City Dallas	State TX	Zip Code 75266-0108	Transaction ID : 40531.E1874	
Purpose of Disbursement Telecommunications		Category/ Type		
Candidate Name		TELECOMMUNICATIONS		
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>c. Verizon</b>			Date of Disbursement MM / DD / YYYY 06 / 30 / 2014	
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 39.30	
City Dallas	State TX	Zip Code 75266-0108	Transaction ID : 40706.E1923	
Purpose of Disbursement Telecommunications		Category/ Type		
Candidate Name		TELECOMMUNICATIONS		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	348.60
<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)		PAGE 60 OF 67	
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. William McClintock Assoc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 16 / 2014</b>
Mailing Address 1583 E 2nd Street		Amount of Each Disbursement this Period <b>324.57</b>
City Scotch Plains	State NJ	
Zip Code 07076-1627	Purpose of Disbursement Printing	<b>Transaction ID : 40706.E1927</b>
Candidate Name	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)	<b>PRINTING</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>324.57</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>108036.70</b>

**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 61 OF 67	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Richard Creter</b>		Date of Disbursement MM / DD / YYYY <b>06 / 30 / 2014</b>
Mailing Address <b>24 Timberwick Drive</b>		Amount of Each Disbursement this Period \$ <b>800.00</b> <b>Transaction ID : 40712.E1939</b>
City <b>Flemington</b> State <b>NJ</b> Zip Code <b>08822-5515</b>	Purpose of Disbursement <b>Refund of Contribution Refund</b>	
Candidate Name	Category/Type <b>010</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
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>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ <b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	\$ <b>800.00</b>

**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 62 OF 67	
	<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)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tuesday Group PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2014</b>
Mailing Address PO Box 11586		Amount of Each Disbursement this Period <b>1500.00</b> <b>Transaction ID : 40712.E1938</b>
City Washington State DC Zip Code 20008-0786	Purpose of Disbursement Refund of Contribution Refund Candidate Name Category/Type <b>010</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name 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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1500.00</b>

**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 63 OF 67
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends Of Mayor Ondish</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address PO Box 12		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40531.E1862</b>
City Florham Park	State NJ	
Zip Code 07932-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Committee To Re-elect Gary Marshuetz</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 6 Elm Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40531.E1867</b>
City Chester	State NJ	
Zip Code 07930-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Bell For Senate</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address PO Box 31		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 40630.E1886</b>
City Palisades Park	State NJ	
Zip Code 07650-	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<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)	PAGE 64 OF 67			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chegwiddden For Mayor</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 10 Robert Street			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40706.E1928</b>
City Wharton	State NJ	Zip Code 07885-	
Purpose of Disbursement CONTRIBUTION	Candidate Name		Contribution
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Committee To Elect Simon For Assembly</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address PO Box 878			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40630.E1922</b>
City Flemington	State NJ	Zip Code 08822-5535	
Purpose of Disbursement CONTRIBUTION	Candidate Name		Contribution
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>c. Union County Republican Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 115 E Grove Street			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 40630.E1914</b>
City Westfield	State NJ	Zip Code 07090-1633	
Purpose of Disbursement RENT	Candidate Name		Contribution
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<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)	PAGE 65 OF 67			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Lance for Congress**

Full Name (Last, First, Middle Initial) <b>A. Union County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address 115 E Grove Street		Amount of Each Disbursement this Period <b>500.00</b>
City Westfield	State NJ	
Zip Code 07090-1633	Purpose of Disbursement RENT	<b>Transaction ID : 40630.E1919</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Lance for Congress

Transaction ID : LS80406.C378

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Leonard Lance

Election: 2014

Primary

General

Other (specify) ▼

Primary

Mailing Address  
264 Stanton Mnt. Rd./Personal Fund

City State ZIP Code  
Lebanon NJ 08833-

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
100000.00 50000.00 50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

02

11

2008

12

31

2012

0.00

% (apr)

Yes

No

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

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

**SUBTOTALS** This Period This Page (optional)..... 50000.00  
**TOTALS** This Period (last page in this line only)..... 50000.00

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

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

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 67
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Lance for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campaign Marketing Strategies Inc</b>	Nature of Debt (Purpose): Teleforum
Mailing Address 3240 Wilson Blvd Ste 202	
City State Zip Code Arlington VA 22201-2009	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : LS40630.E1883</b>	
Amount Incurred This Period 2000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Townsend Group</b>	Nature of Debt (Purpose): Fundraising Management
Mailing Address 1006 Pendleton St	
City State Zip Code Alexandria VA 22314-3202	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : LS40711.E1937</b>	
Amount Incurred This Period 3847.68	Payment This Period 0.00	Outstanding Balance at Close of This Period 3847.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Clover Communications</b>	Nature of Debt (Purpose): Automated Voter Calls
Mailing Address 4 Deerpath Rd	
City State Zip Code Flemington NJ 08822-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : LS40630.E1882</b>	
Amount Incurred This Period 14234.86	Payment This Period 0.00	Outstanding Balance at Close of This Period 14234.86

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	20082.54
2) <b>TOTALS</b> This Period (last page this line number only) .....	20082.54
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	50000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	70082.54