

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value=""/>	<input type="text" value="194.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="108717.80"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="534.00"/>	<input type="text" value="443159.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="109251.80"/>	<input type="text" value="443353.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="77893.80"/>	<input type="text" value="411995.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="31358.00"/>	<input type="text" value="31358.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="6023.14"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

JEWISH COUNCIL FOR EDUCATION AND RESEARCH

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	348700.00
(ii) Unitemized	534.00	27459.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	534.00	376159.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	66000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	534.00	442159.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	1000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	534.00	443159.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	534.00	443159.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	76213.80	326364.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	76213.80	326364.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	680.00	84531.38
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	1000.00	1000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	77893.80	411995.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77893.80	411995.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	534.00	442159.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	534.00	442159.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	76213.80	326364.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	76213.80	326364.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. 37signals

Mailing Address 400 North May Street

City Chicago State IL Zip Code 60622

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : SB21B.9843

Amount of Each Disbursement this Period

24.00

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street, Suite 11

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : SB21B.9856

Amount of Each Disbursement this Period

8.69

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2012

Transaction ID : SB21B.9830

Amount of Each Disbursement this Period

117.00

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

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

149.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 60 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2012

Transaction ID : **SB21B.9831**

Amount of Each Disbursement this Period

-105.30

Full Name (Last, First, Middle Initial)

B. Campaigns & Elections

Mailing Address 1901 N. Moore Street

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Subscriptions

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2012

Transaction ID : **SB21B.9846**

Amount of Each Disbursement this Period

204.00

Full Name (Last, First, Middle Initial)

C. Constant Contact

Mailing Address 122 Hudson Street

City New York State NY Zip Code 10013

Purpose of Disbursement
Email Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 10 / 2012

Transaction ID : **SB21B.9835**

Amount of Each Disbursement this Period

5.44

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

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

104.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Amy Dixon

Mailing Address 365 Irving Avenue

City South Orange State NJ Zip Code 07079

Purpose of Disbursement
Administrative Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2012

Transaction ID : SB21B.9832

Amount of Each Disbursement this Period

87.50

Full Name (Last, First, Middle Initial)

B. Fairway Printing

Mailing Address 115 West 30th Street #408

City New York State NY Zip Code 10018

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2012

Transaction ID : SB21B.9840

Amount of Each Disbursement this Period

523.68

Full Name (Last, First, Middle Initial)

C. Miriam Fogelson

Mailing Address 146a Nassau Avenue Apt 1

City Brooklyn State NY Zip Code 11222

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2012

Transaction ID : SB21B.9833

Amount of Each Disbursement this Period

3225.00

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

3836.18

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Miriam Fogelson

Mailing Address 146a Nassau Avenue Apt 1

City Brooklyn State NY Zip Code 11222

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2012

Transaction ID : SB21B.9853

Amount of Each Disbursement this Period

5650.00

Full Name (Last, First, Middle Initial)

B. Godaddy.com

Mailing Address 14455 North Hayden Rd.

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 17 / 2012

Transaction ID : SB21B.9844

Amount of Each Disbursement this Period

8.99

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2012

Transaction ID : SB21B.9834

Amount of Each Disbursement this Period

500.00

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

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

6158.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9845

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9855

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. HaChaCha LLC

Mailing Address 9336 West Washington Boulevard

City Culver City State CA Zip Code 90232

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9822

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Mik Moore Consulting, LLC

Mailing Address 330 7th Avenue
Suite 1901

City New York State NY Zip Code 10001

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2012

Transaction ID : **SB21B.9825**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Mik Moore Consulting, LLC

Mailing Address 330 7th Avenue
Suite 1901

City New York State NY Zip Code 10001

Purpose of Disbursement
Office Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2012

Transaction ID : **SB21B.9852**

Amount of Each Disbursement this Period

393.06

Full Name (Last, First, Middle Initial)

C. Sandler, Reiff, Young & Lamb, PC

Mailing Address 1025 Vermont Ave., NW
Suite300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2012

Transaction ID : **SB21B.9826**

Amount of Each Disbursement this Period

3180.00

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

13573.06

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. SARE Consulting

Mailing Address 330 7th Avenue
19th Floor

City New York State NY Zip Code 10001

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 27 / 2012

Transaction ID : SB21B.9827

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Strategic Productions

Mailing Address 200 Pacific Ave
Unit A

City Venice State CA Zip Code 90291

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 29 / 2012

Transaction ID : SB21B.9829

Amount of Each Disbursement this Period

38960.92

Full Name (Last, First, Middle Initial)

C. UPS Store

Mailing Address 7 E 8TH ST

City New York State NY Zip Code 10003

Purpose of Disbursement
Shipping

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2012

Transaction ID : SB21B.9828

Amount of Each Disbursement this Period

163.32

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

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

49124.24

76134.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

Full Name (Last, First, Middle Initial)

A. Mik Moore Consulting, LLC

Mailing Address 330 7th Avenue
Suite 1901

City New York State NY Zip Code 10001

Purpose of Disbursement
Loan Repayment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : SB26.9850

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mik Moore Consulting, LLC

Mailing Address 330 7th Avenue
Suite 1901

City New York State NY Zip Code 10001

Purpose of Disbursement
Loan Repayment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : SB26.9851

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **JEWISH COUNCIL FOR EDUCATION AND RESEARCH** Transaction ID : **SC/10.8374**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mik Moore Consulting, LLC	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 330 7th Avenue Suite 1901	
City New York State NY ZIP Code 10001	

Original Amount of Loan 500.00	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred: MM / DD / YYYY (01 / 26 / 2012) Date Due: MM / DD / YYYY (none) Interest Rate: 0.00 % (apr) Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶	[] 0.00
TOTALS This Period (last page in this line only)..... ▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **JEWISH COUNCIL FOR EDUCATION AND RESEARCH** Transaction ID : **SC/10.8375**

LOAN SOURCE Full Name (Last, First, Middle Initial) Mik Moore Consulting, LLC	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 330 7th Avenue Suite 1901	
City New York State NY ZIP Code 10001	

Original Amount of Loan 500.00	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred: MM / DD / YYYY (03 / 26 / 2012) Date Due: MM / DD / YYYY (none) Interest Rate: 0.00 % (apr) Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶	0.00
TOTALS This Period (last page in this line only)..... ▶	0.00

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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 18
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Michelle Citrin	Nature of Debt (Purpose): Media Production
Mailing Address 98 St. Marks Ave Apt 2	
City State Zip Code Brooklyn NY 11217	

Outstanding Balance Beginning This Period 180.00	Transaction ID : SD10.9817	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Margot Leverett	Nature of Debt (Purpose): Media Production
Mailing Address 21-21 29th Street	
City State Zip Code Astoria NY 11105	

Outstanding Balance Beginning This Period 180.00	Transaction ID : SD10.9818	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mikhael Moore	Nature of Debt (Purpose): Payroll
Mailing Address 630 Fort Washington Ave	
City State Zip Code New York NY 10040	

Outstanding Balance Beginning This Period 5483.14	Transaction ID : SD10.8257	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5483.14

1) SUBTOTALS This Period This Page (optional)..... ▶	5843.14
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 18
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
JEWISH COUNCIL FOR EDUCATION AND RESEARCH

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aram Rubenstein-Gillis	Nature of Debt (Purpose): Media Production
Mailing Address 1614 10th Avenue	
City State Zip Code Brooklyn NY 11215	

Outstanding Balance Beginning This Period 500.00	Transaction ID : SD10.9797	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Uri Sharlin	Nature of Debt (Purpose): Media Production
Mailing Address 255 Eastern Parkway	
City State Zip Code Brooklyn NY 11238	

Outstanding Balance Beginning This Period 180.00	Transaction ID : SD10.9819	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jake Shulman-Mant	Nature of Debt (Purpose): Media Production
Mailing Address 68 Edgars Lane	
City State Zip Code Hastings on Hudson NY 10706	

Outstanding Balance Beginning This Period 180.00	Transaction ID : SD10.9796	
Amount Incurred This Period 0.00	Payment This Period 180.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	180.00
2) TOTALS This Period (last page this line number only)..... ▶	6023.14
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	6023.14

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH	FEC IDENTIFICATION NUMBER ▼ C C00452847
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Aram Rubenstein-Gillis		Date MM / DD / YYYY 12 / 17 / 2012
Mailing Address 1614 10th Avenue		Amount 500.00
City Brooklyn	State NY	
Zip Code 11215	Transaction ID : SE.9848	
Purpose of Expenditure Video Production	Category/Type	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 72274.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Jake Shulman-Mant		Date MM / DD / YYYY 12 / 17 / 2012
Mailing Address 68 Edgars Lane		Amount 180.00
City Hastings on Hudson	State NY	
Zip Code 10706	Transaction ID : SE.9849	
Purpose of Expenditure Video Production	Category/Type	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 180.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	680.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	680.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mikhael Moore

Signature

[Electronically Filed]

Date

MM / DD / YYYY
01 / 09 / 2013