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## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

										Office Use	e Only	
1.	NAME OF COMMITTEE (in f		PE OR PRI	NT ▼		mple: If typi r the lines.	ng, type	12FE	4M5			
P	roCure Treatm	nent Cent	ers Inc.	PAC								1
ADI	DRESS (number and	street)	192 Lexingto	n Avenue	e 4th Floor							
Check if different		rent										
L	than previous reported. (AC		New York					NY		10016		
2.	FEC IDENTIFICA	ATION NUME	BER ▼		CITY 🛦			STATE A			ZIP COI	DE 🛦
	C C00476812				3. IS THIS REPORT	\ \ \	NEW (N) <b>OR</b>		AME (A)	NDED		
4.	TYPE OF REP (Choose One)	ORT	(b) Monthly Report		Feb 20 (M2)		May 20 (M5)		Aug 20	0 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Rep				Mar 20 (M3)		Jun 20 (M6)		Sep 20	0 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)		Jul 20 (M7)		Oct 20	(M10)		Jan 31 (YE)
	Quarterly  July 15	Report (Q1)		-Day <b>RE</b> -Electio		Primary (12	P)	Gei	neral (1	2G)		Runoff (12R)
	Quarterly October	Report (Q2)		port for t		Convention	(12C)	Spe	ecial (12	2S)		
		Report (Q3)				M M /	D D /	Y	V V		in the	
	January 3 Year-End	31 Report (YE)	_	E	Election on						State of	
	X July 31 M Report (N Year Only	Ion-election	PC	-Day		General (30	G)	Rur	noff (30	R)		Special (30S)
	Termination (TER)	on Report	ne	eport for t	me:	M = M /	D D /	Y Y	Y		in the	
	,			E	Election on						State of	
5.	Covering Period	01	/ D D D 01		2013	through	M M	30	D /	y y 201	3	
l ce	rtify that I have ex	amined this F	Report and	to the be	est of my kno	wledge and	belief it is tru	e corre	ct and	complete	<u> </u>	
	e or Print Name of		Vincent Talli									
Sigr	nature of Treasurer	Vincent T	allman			[Electronicali	ly Filed] 🛛	ate	M M M	/ D 30	D /	2013
-												
NOT	ΓΕ: Submission of fa	ulse, erroneous	s, or incomp	lete infor	mation may su	bject the per	son signing th	is Repor	t to the	penaltie	s of 2 L	J.S.C. §437g.
1	Office Use Only										<b>FOR</b> ev. 12/20	

Г	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
	or Type Committee Name		
ProC	Cure Treatment Centers Inc. PA	/C	
Report	Covering the Period: From: 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 06 / 30 / Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 2013		7656.34
(b)	Cash on Hand at Beginning of Reporting Period	7656.34	
(c)	Total Receipts (from Line 19)	98.26	98.26
	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7754.60	7754.60
7. Tota	I Disbursements (from Line 31)	4050.00	4050.00
Rep	h on Hand at Close of orting Period tract Line 7 from Line 6(d))	3704.60	3704.60
the	ts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
the	ts and Obligations Owed <b>BY</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
	This committee has qualified as a multical	ndidate committee. (see FEC FORM 1M)	
	F	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 3X (Rev. 06/2004)

Write or Type Committee Name

I. Receipts  Ontributions (other than loans) From:  Individuals/Persons Other  Than Political Committees	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
) Individuals/Persons Other	1	
•		
Than Political Committees		
	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
	00.00	09.26
	98.26	98.26
	08.26	98.26
Lines II(a)(i) and (ii)	90.20	30.20
) Political Party Committees	0.00	0.00
,	0.00	0.00
,		
•		
	98.26	98.26
arty Committees	0.00	0.00
_		
Loans Received	0.00	0.00
=		
pan Repayments Received	0.00	0.00
	7	7
efunds, Rebates, etc.)		
arry Totals to Line 37, page 5)	0.00	0.00
efunds of Contributions Made		
Federal Candidates and Other		
	0.00	0.00
· ·	0.00	0.00
	0.00	
(from Schedule H3)	0.00	0.00
	0.00	
) Levin Funds (from Schedule H5)	0.00	0.00
T. 1.1 T. 1.1 (1.1.1 (1	200	
) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(iii) Unitemized	(iii) TOTAL (add Lines 11(a)(i) and (ii)

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
l. C	Operating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calonial Tour to Date
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(1	o) Other Federal Operating		
(	Expenditures c) Total Operating Expenditures	50.00	50.00
(1	(add 21(a)(i), (a)(ii), and (b))▶	50.00	50.00
	ransfers to Affiliated/Other Party		0.00
C	CommitteesContributions to dederal Candidates/Committees	0.00	0.00
а	nd Other Political Committees	0.00	0.00
	ndependent Expenditures use Schedule E)	0.00	0.00
C	Coordinated Party Expenditures		
(1	2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00
L	oan Repayments Made	0.00	0.00
	oans Made	0.00	0.00
	Refunds of Contributions To: a) Individuals/Persons Other Than Political Committees	0.00	0.00
			200
` `	Political Party Committees      Other Political Committees	0.00	0.00
,,	(such as PACs)	0.00	0.00
(0	d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c)) ▶	0.00	0.00
C	Other Disbursements	4000.00	4000.00
F	ederal Election Activity (2 U.S.C. §431(20))		
	a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
(I	b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(0	c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	3100	7 7
	otal Disbursements (add Lines 21(c), 22,	1050.00	
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	4050.00	4050.00
	otal Federal Disbursements		
(5	subtract Line 21(a)(ii) and Line 30(a)(ii)	4050.00	4050.00

#### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	98.26	98.26
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98.26	98.26
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	50.00	50.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	50.00	50.00

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER:					OF 7	
ITEMIZED DISBURSEMENTS			Use separate schedule(s) (check only			nly one)			
			Summary Page	21b	22	23	24 25	26	
_				27	28a	28b	28c 🗶 29	30b	
	ny information copied from such Reports and Statem for commercial purposes, other than using the name								
	NAME OF COMMITTEE (In Full)								
	ProCure Treatment Centers Inc. PA	/C							
_	Full Name (Last, First, Middle Initial)				<b>.</b>	5			
Α.	Chris Christie for Governor Inc.	Date of	Date of Disbursement						
	Mailing Address 1065 Route 22 West	04	18	2013					
	City	State	Zip Code		Trans	action ID : I	D/51925		
	Bridgewater	NJ	08807		ITAIIS	. 1	5451055		
	Purpose of Disbursement P-2013 Governor NJ			011	Amount	of Each Di	sbursement this	s Period	
	Candidate Name			Category/			10	00.00	
	Chris Christie			Туре			10	00.00	
	Office Sought: House Disbursen								
		Primary Other (spe	General						
	State: District:	Other (spe	ecity) $\blacktriangledown$						
_	Full Name (Last, First, Middle Initial)								
В.	Doherty for Senate			Disburseme					
	Mailing Address 93 Spring St. Suite 200					04 18 2013			
	City S		Trans	action ID :	B451833				
	Newton Purpose of Disbursement	NJ	07860						
	P-2013 State Senate 23 NJ			011	Amount	of Each Di	sbursement this	s Period	
	Candidate Name			Category/					
	Mike Doherty			Type				00.00	
	Office Sought: House Disbursen		2013						
		Primary	General						
	President State: District:	Other (spe	ecity) 🔻						
_	Full Name (Last, First, Middle Initial)								
C.		`amnai	an Committe	20	Date of	Disburseme	ent		
	Therias of Rohald E. Rioc Genate C	M M	/ D D	/ Y Y Y	Y				
	Mailing Address P.O. Box 20037					18	2013		
	City		Transaction ID : B451832						
	Newark NJ 07101					action ID:	B451832		
	Purpose of Disbursement P-2013 State Senate 28 NJ	1							
	Candidate Name	011	Amount of Each Disbursement this Perio			s Period			
	Ronald L Rice		Category/			10	00.00		
	Office Sought: House Disbursen	2013	Type						
		Primary	General						
		Other (spe	ecify) 🔻						
	State: District:		•						
Г	·								
S	SUBTOTAL of Disbursements This Page (optional)			······			300	00.00	
Ι,	OTAL This Period (lest page this line number and )								
Ι'	<b>OTAL</b> This Period (last page this line number only).					- 1			

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 7 OF 7		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b	one) 22 23	24 25 26 28c X 29 30		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		d by any perso	on for the purpose of sol	iciting contributions		
NAME OF COMMITTEE (In Full)	as and address of any pointed					
ProCure Treatment Centers Inc. PA	√C					
Full Name (Last, First, Middle Initial)						
A. Election Fund of Senator Joseph V	Date of Disbursement					
Mailing Address P.O. Box 1467		04 18	2013			
City S Woodbridge		Transaction ID : B45	51834			
Purpose of Disbursement P-2013 State Senate 19 NJ	011	Amount of Each Disbursement this Period				
Candidate Name		Category/	Amount of Each Displ			
Joseph F Vitale  Office Sought: House Disburser	nent For: 2013	Type	7	1000.00		
Senate	Primary General  Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial)  3.		Date of Disbursement				
Mailing Address		M - M / D - D / Y - Y - Y				
City						
Purpose of Disbursement			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type				
	nent For: Primary General Other (specify) ▼	71:-	,	,		
State: District:						
Full Name (Last, First, Middle Initial)		Date of Disbursement	Y Y Y Y Y			
Mailing Address		M - M / D - D /				
City	City State Zip Code					
Purpose of Disbursement						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period			
President	nent For:  Primary General  Other (specify)	1,1,00				
State: District:						
SUBTOTAL of Disbursements This Page (optional)			,	1000.00		
TOTAL This Period (last page this line number only).				4000.00		