

**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="49185.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="163099.50"/>	<input type="text" value="442625.50"/>
(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="212284.50"/>	<input type="text" value="442819.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="103566.70"/>	<input type="text" value="334101.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="108717.80"/>	<input type="text" value="108717.80"/>
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="7613.14"/>	

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).....	114000.00	348700.00
(ii) Unitemized	8099.50	26925.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	122099.50	375625.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	41000.00	66000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	163099.50	441625.50
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))..... ▶	163099.50	442625.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	163099.50	442625.50

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
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	51941.88	250150.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	51941.88	250150.32
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)	51624.82	83851.38
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
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)) ..	103566.70	334101.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103566.70	334101.70

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)	163099.50	441625.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	163099.50	441625.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	51941.88	250150.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	51941.88	250150.32

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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. Steven S. Fischman

Mailing Address One Wells Avenue

City State Zip Code
Newton MA 02459

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

Name of Employer Occupation
New England Development Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.9715

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Chandra Friese

Mailing Address 3675 Clay St.

City State Zip Code
San Francisco CA 94118

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

Name of Employer Occupation
Mayne and company RE real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.9433

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Irving A. Smokler

Mailing Address 2424 N. Federal Highway

City State Zip Code
Boca Raton FL 33431

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.9709

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional).....▶	13000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Alexander Soros		Date of Receipt M M / D D / Y Y Y Y Y 10 / 26 / 2012
Mailing Address 888 7th Avenue		Transaction ID : SA11AI.9718
City New York	State NY	Zip Code 10106
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100000.00	
Name of Employer None	Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300000.00	

Full Name (Last, First, Middle Initial) B. Marion Usher		Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012
Mailing Address 2021 Hilyer Place, NW		Transaction ID : SA11AI.9711
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self	Occupation Therapist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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

SUBTOTAL of Receipts This Page (optional).....▶	101000.00
TOTAL This Period (last page this line number only).....▶	114000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. AMERICAN BRIDGE 21ST CENTURY

Mailing Address 700 13TH STREET, NW, SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00492140

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11C.9714

Amount of Each Receipt this Period
25000.00

Full Name (Last, First, Middle Initial)
B. AMERICAN BRIDGE 21ST CENTURY

Mailing Address 700 13TH STREET, NW, SUITE 600

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00492140

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
66000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11C.9719

Amount of Each Receipt this Period
16000.00

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

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) ▼

Aggregate Year-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).....▶	41000.00
TOTAL This Period (last page this line number only).....▶	41000.00

**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. 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 / D D / Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SB21B.9789

Amount of Each Disbursement this Period

294.07

Full Name (Last, First, Middle Initial)

B. 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 / D D / Y Y Y Y Y
11 / 23 / 2012

Transaction ID : SB21B.9785

Amount of Each Disbursement this Period

199.00

Full Name (Last, First, Middle Initial)

C. Walter Karman Bell

Mailing Address 481 8th Avenue

City New York State NY Zip Code 10001

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
10 / 21 / 2012

Transaction ID : SB21B.9720

Amount of Each Disbursement this Period

500.00

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

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

993.07

**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. Berlin Rosen

Mailing Address 15 Maiden Lane, Suite 1600

City State Zip Code
New York NY 10038

Purpose of Disbursement
Public Relations Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9722

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Berlin Rosen

Mailing Address 15 Maiden Lane, Suite 1600

City State Zip Code
New York NY 10038

Purpose of Disbursement
Public Relations Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9771

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Chase

Mailing Address PO Box 260180

City State Zip Code
Baton Rouge LA 70826

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.9729

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. Chase

Mailing Address PO Box 260180

City State Zip Code
Baton Rouge LA 70826

Purpose of Disbursement
Bank Charges

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
10 / 26 / 2012

Transaction ID : SB21B.9737

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Chase

Mailing Address PO Box 260180

City State Zip Code
Baton Rouge LA 70826

Purpose of Disbursement
Credit Card Overpayment and Interest

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 / 13 / 2012

Transaction ID : SB21B.9779

Amount of Each Disbursement this Period

287.00

Full Name (Last, First, Middle Initial)

C. Chase

Mailing Address PO Box 260180

City State Zip Code
Baton Rouge LA 70826

Purpose of Disbursement
Bank Charges

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 / 13 / 2012

Transaction ID : SB21B.9782

Amount of Each Disbursement this Period

15.00

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

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

317.00

**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. 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
11 / 13 / 2012

Transaction ID : SB21B.9781

Amount of Each Disbursement this Period

54.44

Full Name (Last, First, Middle Initial)

B. 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
11 / 13 / 2012

Transaction ID : SB21B.9772

Amount of Each Disbursement this Period

303.26

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
10 / 25 / 2012

Transaction ID : SB21B.9733

Amount of Each Disbursement this Period

4526.48

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

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

4884.18

**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 State Zip Code
Brooklyn NY 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

M M / D D / Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SB21B.9783

Amount of Each Disbursement this Period

4775.00

Full Name (Last, First, Middle Initial)

B. Godaddy.com

Mailing Address 14455 North Hayden Rd.

City State Zip Code
Scottsdale AZ 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

M M / D D / Y Y Y Y Y
10 / 23 / 2012

Transaction ID : SB21B.9730

Amount of Each Disbursement this Period

30.51

Full Name (Last, First, Middle Initial)

C. Godaddy.com

Mailing Address 14455 North Hayden Rd.

City State Zip Code
Scottsdale AZ 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

M M / D D / Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SB21B.9744

Amount of Each Disbursement this Period

14.34

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

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

4819.85

**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. Godaddy.com

Mailing Address 14455 North Hayden Rd.

City State Zip Code
Scottsdale AZ 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

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2012

Transaction ID : SB21B.9746

Amount of Each Disbursement this Period

12.48

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Ampitheatre Parkway

City State Zip Code
Mountain View CA 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

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2012

Transaction ID : SB21B.9755

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Ampitheatre Parkway

City State Zip Code
Mountain View CA 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

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

Transaction ID : SB21B.9778

Amount of Each Disbursement this Period

350.00

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

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

562.48

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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. 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
11 / 26 / 2012

Transaction ID : SB21B.9788

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Gristides

Mailing Address 307 West 26th Street

City New York State NY Zip Code 10001

Purpose of Disbursement
Election Night Food

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2012

Transaction ID : SB21B.9760

Amount of Each Disbursement this Period

244.40

Full Name (Last, First, Middle Initial)

C. Eric Hasse

Mailing Address 22740 Clarendon St.

City Woodland Hills State CA Zip Code 91367

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
10 / 29 / 2012

Transaction ID : SB21B.9743

Amount of Each Disbursement this Period

400.00

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

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

1144.40

**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. Laura Yvonne Hayes

Mailing Address PO Box 39725

City Los Angeles State CA Zip Code 90039

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB21B.9738

Amount of Each Disbursement this Period

300.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. James P Horan

Mailing Address 12211 Spring Trail

City Sylmar State CA Zip Code 91324

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB21B.9740

Amount of Each Disbursement this Period

300.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Humongous Inc.

Mailing Address 49 Douglass Street

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2012

Transaction ID : SB21B.9731

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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

1600.00

**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. Kobeyaki

Mailing Address 293 7th Ave.

City New York State NY Zip Code 10001

Purpose of Disbursement
Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : **SB21B.9774**

Amount of Each Disbursement this Period

259.10

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
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 / 13 / 2012

Transaction ID : **SB21B.9773**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. New Organizing Institute

Mailing Address 1133 19th St NW Suite 850

City Washington State DC Zip Code 20036

Purpose of Disbursement
Conference Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 23 / 2012

Transaction ID : **SB21B.9786**

Amount of Each Disbursement this Period

206.98

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

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

10466.08

**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. Akia Ginneh Pacheco

Mailing Address 735 Maltman Avenue

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2012

Transaction ID : SB21B.9752

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. John Randolph

Mailing Address 316 W. 93rd St

City New York State NY Zip Code 10025

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2012

Transaction ID : SB21B.9723

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Corrine Ray

Mailing Address 836 Bergen Street

City Brooklyn State NY Zip Code 11238

Purpose of Disbursement
Video Production

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B.9769

Amount of Each Disbursement this Period

600.00

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

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

1900.00

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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. Aram Rubenstein-Gillis

Mailing Address 1614 10th Avenue

City Brooklyn State NY Zip Code 11215

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
10 / 21 / 2012

Transaction ID : **SB21B.9821**

Amount of Each Disbursement this Period

545.00

Full Name (Last, First, Middle Initial)

B. 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

MM / DD / YYYY
10 / 25 / 2012

Transaction ID : **SB21B.9734**

Amount of Each Disbursement this Period

840.00

Full Name (Last, First, Middle Initial)

C. Shoot the Messenger Productions

Mailing Address 423 Atlantic Ave

City New York State NY Zip Code 11217

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
10 / 22 / 2012

Transaction ID : **SB21B.9727**

Amount of Each Disbursement this Period

2500.00

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

3885.00

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. John Slabyk

Mailing Address 25 Stearns Ave

City Buffalo State NY Zip Code 14218

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 / 02 / 2012

Transaction ID : **SB21B.9750**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Video Genie

Mailing Address 4 W. 4th Ave Unit 308

City San Mateo State CA Zip Code 94402

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 / 02 / 2012

Transaction ID : **SB21B.9754**

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. Elon James White

Mailing Address 377 Montgomery St

City Brooklyn State NY Zip Code 11225

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
10 / 21 / 2012

Transaction ID : **SB21B.9725**

Amount of Each Disbursement this Period

2500.00

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

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

6250.00

51084.06

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 0.00	Balance Outstanding at Close of This Period 500.00
-----------------------------------	------------------------------------	---

TERMS

Date Incurred MM / DD / YYYY 01 / 26 / 2012	Date Due MM / DD / YYYY none	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	------------------------------------	-------------------------------	---

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)..... ▶	[] 500.00
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 0.00	Balance Outstanding at Close of This Period 500.00
-----------------------------------	------------------------------------	---

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).....▶	500.00
TOTALS This Period (last page in this line only).....▶	1000.00

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 23 OF 32
	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 0.00	Transaction ID : SD10.9817	
Amount Incurred This Period 90.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

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 0.00	Transaction ID : SD10.9818	
Amount Incurred This Period 180.00	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)..... ▶	5753.14
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 24 OF 32
	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 0.00	Transaction ID : SD10.9797	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

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 0.00	Transaction ID : SD10.9819	
Amount Incurred This Period 180.00	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 0.00	Transaction ID : SD10.9796	
Amount Incurred This Period 180.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

1) SUBTOTALS This Period This Page (optional)..... ▶	860.00
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 25 OF 32
	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 St. Louis Jewish Light	Nature of Debt (Purpose): Advertising
Mailing Address 6 Millstone Campus	
City State Zip Code St. Louis MO 63146	

Outstanding Balance Beginning This Period <input type="text" value="9387.82"/>	Transaction ID : SD10.7860	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="9387.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="6613.14"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="1000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="7613.14"/>

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

Full Name (Last, First, Middle Initial) of Payee Another Green World Productions	Date M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 9400 Flicker Way	Amount 12500.00
City State Zip Code Los Angeles CA 90069	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/Type []
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 43987.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.9349

Full Name (Last, First, Middle Initial) of Payee Another Green World Productions	Date M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
Mailing Address 9400 Flicker Way	Amount 6000.00
City State Zip Code Los Angeles CA 90069	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/Type []
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 49987.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.9351

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	[]
(c) TOTAL Independent Expenditures.....▶	[]

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 [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2013

Signature

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 Michelle Citrin		Date MM / DD / YYYY 10 / 31 / 2012
[MEMO ITEM]		Amount 180.00
Mailing Address 98 St. Marks Ave Apt 2		
City Brooklyn	State NY	Zip Code 11217
Purpose of Expenditure Media Production	Category/ Type	Transaction ID : SE.9808
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
5987.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Detroit Free Press		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 615 W. Lafayette		Amount 2187.00
City Detroit	State MI	
Purpose of Expenditure Newspaper Advertising	Category/ Type	Transaction ID : SE.9345
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
58174.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	2187.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Mikhael Moore

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 12 / 2013**

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 Detroit Jewish News		Date MM / DD / YYYY 10 / 18 / 2012
Mailing Address P.O. Box 2267		Amount 1950.00
City Southfield	State MI	
Zip Code 48037	Transaction ID : SE.9315	
Purpose of Expenditure Newspaper Ad	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 31487.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Detroit Jewish News		Date MM / DD / YYYY 10 / 29 / 2012
Mailing Address P.O. Box 2267		Amount 6000.00
City Southfield	State MI	
Zip Code 48037	Transaction ID : SE.9344	
Purpose of Expenditure Newspaper Advertising	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 55987.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7950.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mikhael Moore

Signature

[Electronically Filed]

Date

MM / DD / YYYY
07 / 12 / 2013

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 Facebook		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 156 University Ave.		Amount 6000.00
City Palo Alto	State CA	
Zip Code 94301	Transaction ID : SE.9359	
Purpose of Expenditure Web Advertising	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 64774.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Google		Date MM / DD / YYYY 11 / 01 / 2012
Mailing Address 1600 Ampitheatre Parkway		Amount 7000.00
City Mountain View	State CA	
Zip Code 94043	Transaction ID : SE.9361	
Purpose of Expenditure Web Advertising	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 71774.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	13000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mikhael Moore

Signature

[Electronically Filed]

Date

MM / DD / YYYY
07 / 12 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) JEWISH COUNCIL FOR EDUCATION AND RESEARCH		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00452847 </div>
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 Margot Leverett		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 31 / 2012</div>
[MEMO ITEM] Mailing Address 21-21 29th Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">180.00</div>
City Astoria	State NY	
Zip Code 11105	Transaction ID : SE.9810	
Purpose of Expenditure Media Production	Category/ Type <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div>	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 <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">55987.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Adriel Luis		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2012</div>
Mailing Address 3400 Stevenson Blvd #37D		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">600.00</div>
City Fremont	State CA	
Zip Code 94538	Transaction ID : SE.9352	
Purpose of Expenditure Video Production - Dissem 10/31/12	Category/ Type <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div>	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 <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">58774.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	600.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mikhael Moore

Signature [Electronically Filed] Date MM / DD / YYYY
07 / 12 / 2013

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

Full Name (Last, First, Middle Initial) of Payee Aram Rubenstein-Gillis [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address 1614 10th Avenue		Amount 500.00
City Brooklyn	State NY	Zip Code 11215
Purpose of Expenditure Media Production	Category/ Type	Transaction ID : SE.9792
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 55987.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Uri Sharlin [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address 255 Eastern Parkway		Amount 180.00
City Brooklyn	State NY	Zip Code 11238
Purpose of Expenditure Media Production	Category/ Type	Transaction ID : SE.9812
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 55987.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mikhael Moore **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2013

Signature

