

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

1200 Route 22 East

☐ Check if different than previously reported. (ACC)

Bridgewater

NJ

08807

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00487181

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☐ July 15 Quarterly Report (Q2)

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE)

☐ July 31 Mid-Year Report (Non-election Year Only) (MY)

☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

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

in the State of

(d) 30-Day

POST-Election

Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

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

11 04

2014

in the State of

NJ

5. Covering Period

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

10 16

2014

through

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

11 24

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Zahide A. Yildirmaz

Signature of Treasurer

Zahide A. Yildirmaz

[Electronically Filed]

Date

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

12 04

2014

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

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		-610.86
(b) Cash on Hand at Beginning of Reporting Period.....	11755.89	
(c) Total Receipts (from Line 19)	6000.00	48275.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	17755.89	47664.14
7. Total Disbursements (from Line 31)	15133.60	45041.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2622.29	2622.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M /

D D /

Y Y Y Y Y

10

16

2014

To:

M M /

D D /

Y Y Y Y Y

11

24

2014

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).....

6000.00

46525.00

(ii) Unitemized

0.00

1750.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

6000.00

48275.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

6000.00

48275.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

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))..... ▶

6000.00

48275.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

6000.00

48275.00

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	283.60	4841.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	283.60	4841.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	34550.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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	850.00	5650.00
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)) ..	15133.60	45041.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15133.60	45041.85

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)	6000.00	48275.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6000.00	48275.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	283.60	4841.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	283.60	4841.85

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 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Fazli Yurter Ozcan

Mailing Address 1600 South Eads Street, Apt 631S

City

Arlington

State

VA

Zip Code

22202-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHP

Occupation

Washington Representative

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : AE23912E7786C4C3C8E8

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Yasin Justin Yildiz

Mailing Address 6613 Irvin pl

City

Alexandria

State

VA

Zip Code

22312-2236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Risingstar Design Build

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2014

Transaction ID : A56E9CBD72BAA411ABBO

Amount of Each Receipt this Period

5000.00

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
☐ Other (specify) ▼

☐ General

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)..... ►

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

6000.00

6000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

<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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Regus

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Mailing Address PO Box 842456

Transaction ID : B43D17BE2E05F4847ADF

City	State	Zip Code
Dallas	TX	75284-2456

Amount of Each Disbursement this Period

79.00

Purpose of Disbursement
RentCategory/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Paypal

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address PO Box 45950

Transaction ID : BE8EFB08A0EE54DEFAD3

Amount of Each Disbursement this Period

174.60

City	State	Zip Code
Omaha	NE	68145-0950

Purpose of Disbursement
CC Processing FeesCategory/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. Paypal

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

Mailing Address PO Box 45950

Transaction ID : B1E687F96BE574A979E0

Amount of Each Disbursement this Period

30.00

City	State	Zip Code
Omaha	NE	68145-0950

Purpose of Disbursement
Bank FeeCategory/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

283.60

283.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDRE CARSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address P.O. BOX 1863

City	State	Zip Code
INDIANAPOLIS	IN	46206

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. ANDRE D. CARSON

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 07

Transaction ID : BFE4EDCD4A8E54D32911

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PATRIOTS FOR PERRY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Mailing Address PO BOX 147

City	State	Zip Code
RED LION	PA	17356

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Scott Perry

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District: 04

Transaction ID : BD494F480A95D4707A62

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KINZINGER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address PO BOX 487

City	State	Zip Code
New Lenox	IL	60451-0487

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Adam D. Kinzinger

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 16

Transaction ID : BE57A10A5CFD746DFBB0

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. PETE SESSIONS FOR CONGRESS

Mailing Address PO BOX 823047

City	State	Zip Code
DALLAS	TX	75382

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Pete A. SessionsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 32

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : B5B9DC16A70934BC6A7A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DONNA EDWARDS FOR CONGRESS

Mailing Address P.O. BOX 441153

City	State	Zip Code
FORT WASHINGTON	MD	20749

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Donna F. EdwardsOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : B53D5B86F796647A0ACB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STIVERS FOR CONGRESS

Mailing Address 81 S FIFTH STREET

City	State	Zip Code
Columbus	OH	43215-4323

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Steve E. StiversOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : B3800771A5F4B4EDEA71

Amount of Each Disbursement this Period

1000.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. JOHN FOUST FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Mailing Address PO BOX 962

Transaction ID : BEC1C46FCD4B043ECB26

City	State	Zip Code
MCLEAN	VA	22101

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Political Contribution

Candidate Name

John FoustCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 10

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JIM CLYBURN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Mailing Address POST OFFICE BOX 12567

Transaction ID : B4FB864FEC1084377929

City	State	Zip Code
COLUMBIA	SC	29211

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. James E. ClyburnCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 06

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FRANK GUINTA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Mailing Address P.O. Box 877

Transaction ID : B45CBF4497B1046689F0

City	State	Zip Code
Manchester	NH	03105

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Political Contribution

Candidate Name

FRANK GUINTACategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

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

8000.00

14000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Keep Karl Keith Auditor

Mailing Address 241 Topton Drive

City	State	Zip Code
Vandalia	OH	45377-1729

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : BB377BFEF069E4AA6A9B

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

B. Foley for Commission

Mailing Address 215 Briarcliff Rd

City	State	Zip Code
Dayton	OH	45415-3424

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : B286153CAB1CF42F492C

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

850.00

850.00
