

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

2012 JUN 17 Office Use Only

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

ADDRESS (number and street) 1610 CROOKMAN AVE SUITE A Asbury Park NJ 07712-1

2. FEC IDENTIFICATION NUMBER C00516971 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT NJ 106

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 06/05/2012 in the State of NJ

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

5. Covering Period 05/17/2012 through 06/30/2012

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 Scott M. Kelly Signature of Treasurer Scott M. Kelly Date 07/16/2012

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

Table with 10 columns and 1 row. The first column is labeled 'Office Use Only'. The last column contains 'FEC FORM 3 (Revised 02/2003)'. The rest of the cells are empty.

12030850966

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Report Covering the Period: From:

05 ' 17 ' 2012

To:

06 ' 30 ' 2012

12030850967

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	8,480.00	22,486.76
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	8,480.00	22,486.76
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	15,904.73	21,685.36
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	15,904.73	21,685.36
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	801.40	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

*Cullari For Congress*

Report Covering the Period: From:

*05'17'2012*

To:

*06'30'2012*

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

*8,480.00*

*22,235.83*

(ii) Unitemized.....

*000*

*000*

(iii) TOTAL of contributions from individuals ▶

*8,480.00*

*22,235.83*

(b) Political Party Committees.....

*000*

*200.00*

(c) Other Political Committees (such as PACs).....

*000*

*000*

(d) The Candidate.....

*000*

*50.93*

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

*8,480.00*

*22,486.76*

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

*000*

*000*

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

*000*

*000*

(b) All Other Loans.....

*000*

*000*

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

*000*

*000*

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

*000*

*000*

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

*000*

*000*

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

*8,480.00*

*22,486.76*

12030850968

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	15,904.73	21,685.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	000	000
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	000	000
(b) Of All Other Loans.....	000	000
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	000	000
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	000	000
(b) Political Party Committees.....	000	000
(c) Other Political Committees (such as PACs).....	000	000
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	000	000
21. OTHER DISBURSEMENTS.....	000	000
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	15,904.73	21,685.36

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8,226.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8,480.00
25. SUBTOTAL (add Line 23 and Line 24).....	16,706.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15,904.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	801.40

12030850969

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

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

FOR LINE NUMBER:		PAGE	OF
(check only one)		1	5
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full) **Cullari For Congress**

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

Mailing Address **3 Oak Tree Ln**

City **Holmdel** State **NJ** Zip Code **07733**

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

Name of Employer **Trinity Rehab** Occupation **Occupational Therapist**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1,000.00**

Date of Receipt **05' 30' 2012**

Amount of Each Receipt this Period **1,000.00**

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

Mailing Address **15 Cheryl Ln**

City **Millstone** State **NJ** Zip Code **08510**

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **06' 04' 2012**

Amount of Each Receipt this Period **25.00**

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

Mailing Address **209 Chace Lake Pkwy**

City **Birmingham** State **AL** Zip Code **35244**

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

Name of Employer **Carewise Health** Occupation **Health Coach**

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1,800.00**

Date of Receipt **05' 31' 2012**

Amount of Each Receipt this Period **1,800.00**

**SUBTOTAL** of Receipts This Page (optional) **1,205.00**

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

**1,205.00**

12030850970

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

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

FOR LINE NUMBER: PAGE 2 OF 5  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) Cullari For Congress

**A.** Full Name (Last, First, Middle Initial) DeGrazio, John J  
Mailing Address 37 Ann Street  
City Colts Neck State NJ Zip Code 07722  
FEC ID number of contributing federal political committee. C  
Name of Employer Self-Employed Occupation Music Production  
Receipt For:  Primary  General  
 Other (specify)  
Election Cycle-to-Date 250.00

Date of Receipt 06'05'2012  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial) Habra, Saad F  
Mailing Address 12 Bank St. Suite 102  
City Summit State NJ Zip Code 07901  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Doctor  
Receipt For:  Primary  General  
 Other (specify)  
Election Cycle-to-Date 1,000.00

Date of Receipt 05'02'2012  
Amount of Each Receipt this Period 1,000.00

**C.** Full Name (Last, First, Middle Initial) Tortoreto, Joseph L  
Mailing Address 52 Larkspur Circle  
City Sicklerville State NJ Zip Code 08081  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Entrepreneur  
Receipt For:  Primary  General  
 Other (specify)  
Election Cycle-to-Date 150.00

Date of Receipt 05'24'2012  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ~~1,400.00~~  
**TOTAL** This Period (last page this line number only)

1,400.00

12030850971

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

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

FOR LINE NUMBER: (check only one)		PAGE 3 OF 5	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Cullaci For Congress

A. Full Name (Last, First, Middle Initial) Kievit, Ann R

Mailing Address 29 Dogwood Trail

City Stockholm State NJ Zip Code 07460

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Politician

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2,500.00

Date of Receipt 05'21'2012

Amount of Each Receipt this Period 2,400.00

B. Full Name (Last, First, Middle Initial) Berkowitz, Steven

Mailing Address 22 Malke Drive

City Ocean State NJ Zip Code 07712

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Doctor

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1,000.00

Date of Receipt 06'05'2012

Amount of Each Receipt this Period 1,000.00

C. Full Name (Last, First, Middle Initial) Bennett-Wise, Peggy L

Mailing Address 870 N. Concourse

City Cliffwood Beach State NJ Zip Code 07735

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 50.00

Date of Receipt 06'07'2012

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 3450.00

TOTAL This Period (last page this line number only)

3450.00

12030850972

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

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

FOR LINE NUMBER: PAGE 4 OF 5  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full) **Cullari For Congress**

Full Name (Last, First, Middle Initial) **Measley, Charles D**

A. Mailing Address **71 Navesink Ave**

City **Rumson** State **NJ** Zip Code **07760**

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

Name of Employer **Self-Employed** Occupation **Ice Cream Man**

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date **1,500.00**

Date of Receipt  
M M ' D D ' Y Y Y Y  
**05 ' 24 ' 2012**

Amount of Each Receipt this Period  
**1,500.00**

Full Name (Last, First, Middle Initial) **Jacobson, Daniel P**

B. Mailing Address **10 Deal Lake Ct.**

City **Asbury Park** State **NJ** Zip Code **07712**

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

Name of Employer **Tri-City News** Occupation **Owner**

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date **300.00**

Date of Receipt  
**05 ' 30 ' 2012**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial) **Allegra, Marshall P**

C. Mailing Address **10 Sycamore Lane**

City **Rumson** State **NJ** Zip Code **07760**

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

Name of Employer **Self-Employed** Occupation **Doctor**

Receipt For:  Primary  General  Other (specify)  
Election Cycle-to-Date **1,750.00**

Date of Receipt  
**05 ' 31 ' 2012**

Amount of Each Receipt this Period  
**0,250.00**

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

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

**1,950.00**

12030850973



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 5	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) **Cullari For Congress**

A. Full Name (Last, First, Middle Initial) **Kaller, Myron**

Mailing Address **321 Sunset Ave Apt 4GF**

City **Asbury Park NJ 07712**

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

Name of Employer **Kaller Historical Docs** Occupation **Owner**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **20000**

Date of Receipt **05' 24' 2012**

Amount of Each Receipt this Period **200.00**

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

Mailing Address **PO Box 902**

City **Woodbridge NJ 07905**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt **05' 19' 2012**

Amount of Each Receipt this Period **25.00**

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

Mailing Address **524 Green Grove Rd**

City **Asbury Park NJ 07712**

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

Name of Employer **Synaxis** Occupation **Owner**

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **05' 28' 2012**

Amount of Each Receipt this Period **250.00**

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

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

**475.00**

**8,480.00**

12030850974

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 35

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Cullari for Congress**

Full Name (Last, First, Middle Initial) <b>A. Americas Cup</b>		Date of Disbursement MM/DD/YYYY <b>06/05/2012</b>
Mailing Address <b>533 Cookman Ave</b>		Amount of Each Disbursement this Period <b>12.78</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>007</b>
Purpose of Disbursement <b>Food-Drink</b>		
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b>	District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>		Date of Disbursement MM/DD/YYYY <b>06/06/2012</b>
Mailing Address <b>3575 RT 66</b>		Amount of Each Disbursement this Period <b>23001</b>
City <b>Neptune</b>	State <b>NJ</b>	
Zip Code <b>07753</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Office supplies</b>		
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b>	District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. Synaxis</b>		Date of Disbursement MM/DD/YYYY <b>05/27/2012</b>
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>31390</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>007</b>
Purpose of Disbursement <b>Meeting / Dinner</b>		
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b>	District: <b>06</b>	<b>556.69</b>

SUBTOTAL of Disbursements This Page (optional).....	<b>556.69</b>
TOTAL This Period (last page this line number only).....	<b>556.69</b>

12030850975

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>2</u> OF <u>35</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>A. BP Gas</u>		Date of Disbursement <u>06</u> / <u>05</u> / <u>2012</u>
Mailing Address <u>20 Main St</u>		Amount of Each Disbursement this Period <u>49.79</u>
City <u>Asbury Park</u>	State <u>NJ</u>	
Zip Code <u>07712</u>		Category/ Type <u>002</u>
Purpose of Disbursement <u>Gas</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>B. Krauzers</u>		Date of Disbursement <u>06</u> / <u>05</u> / <u>2012</u>
Mailing Address <u>31 S Main St.</u>		Amount of Each Disbursement this Period <u>21.00</u>
City <u>Neptune City</u>	State <u>NJ</u>	
Zip Code <u>07753</u>		Category/ Type <u>007</u>
Purpose of Disbursement <u>Food-Drink</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>C. Richs Deli</u>		Date of Disbursement <u>06</u> / <u>05</u> / <u>2012</u>
Mailing Address <u>2826 RT 23</u>		Amount of Each Disbursement this Period <u>14.17</u>
City <u>Stockholm</u>	State <u>NJ</u>	
Zip Code <u>07460</u>		Category/ Type <u>007</u>
Purpose of Disbursement <u>Food-Drink</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>84.91</u>
TOTAL This Period (last page this line number only).....	

12030850976

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 3 OF 35

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

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

Full Name (Last, First, Middle Initial) <b>BP Gas</b>		Date of Disbursement MM ' DD ' YYYY <b>06 ' 04 ' 2012</b>
Mailing Address <b>20 Main St.</b>		Amount of Each Disbursement this Period <b>8.50</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>	Purpose of Disbursement <b>Gas</b>	Category/ Type <b>007</b>
Candidate Name <b>Ernesto Cullari</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>Comcast spotlight PA</b>		Date of Disbursement MM ' DD ' YYYY <b>06 ' 05 ' 2012</b>
Mailing Address <b>166E Lowering Mill Rd</b>		Amount of Each Disbursement this Period <b>1954.00</b>
City <b>Bala Cynwyd</b>	State <b>PA</b>	
Zip Code <b>19004</b>	Purpose of Disbursement <b>TV ads</b>	Category/ Type <b>004</b>
Candidate Name <b>Ernesto Cullari</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>Charles Measley</b>		Date of Disbursement MM ' DD ' YYYY <b>05 ' 29 ' 2012</b>
Mailing Address <b>71 Navesink Ave</b>		Amount of Each Disbursement this Period <b>2200</b>
City <b>Rumson</b>	State <b>NJ</b>	
Zip Code <b>07760</b>	Purpose of Disbursement <b>Salary</b>	Category/ Type <b>001</b>
Candidate Name <b>Ernesto Cullari</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>198450</b>
TOTAL This Period (last page this line number only).....	

12030850977

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>4</u> OF <u>35</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>walmart</u>		Date of Disbursement <u>06</u> / <u>04</u> / <u>2012</u>
Mailing Address <u>3575 Rt 66</u>		Amount of Each Disbursement this Period <u>134.73</u>
City <u>Neptune</u>	State <u>NJ</u> Zip Code <u>07753</u>	
Purpose of Disbursement <u>Office Supplies</u>		Category/ Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>BP Gas</u>		Date of Disbursement <u>06</u> / <u>04</u> / <u>2012</u>
Mailing Address <u>20 Main St.</u>		Amount of Each Disbursement this Period <u>40.00</u>
City <u>Asbury Park</u>	State <u>NJ</u> Zip Code <u>07712</u>	
Purpose of Disbursement <u>GAS</u>		Category/ Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>USPS</u>		Date of Disbursement <u>06</u> / <u>04</u> / <u>2012</u>
Mailing Address <u>1601 RT 35</u>		Amount of Each Disbursement this Period <u>810</u>
City <u>Middletown</u>	State <u>NJ</u> Zip Code <u>07748</u>	
Purpose of Disbursement <u>Stamps</u>		Category/ Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

SUBTOTAL of Disbursements This Page (optional).....	<u>18283</u>
TOTAL This Period (last page this line number only).....	

12030850978

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <u>5</u> OF <u>35</u>
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>Americas Cup</u>		Date of Disbursement <u>05</u> / <u>31</u> / <u>2012</u>
Mailing Address <u>633 Cookman Ave</u>		Amount of Each Disbursement this Period <u>11.34</u>
City <u>Asbury Park</u>	State <u>NJ</u>	
Zip Code <u>07712</u>	Purpose of Disbursement <u>Food-Drink</u>	Category/Type <u>007</u>
Candidate Name <u>Ernesto Cullari</u>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>USPS</u>		Date of Disbursement <u>08</u> / <u>01</u> / <u>2012</u>
Mailing Address <u>801 Bangs Ave</u>		Amount of Each Disbursement this Period <u>450.00</u>
City <u>Asbury Park</u>	State <u>NJ</u>	
Zip Code <u>07712</u>	Purpose of Disbursement <u>Postage</u>	Category/Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>Americas Cup</u>		Date of Disbursement <u>08</u> / <u>01</u> / <u>2012</u>
Mailing Address <u>633 Cookman Ave</u>		Amount of Each Disbursement this Period <u>17.17</u>
City <u>Asbury Park</u>	State <u>NJ</u>	
Zip Code <u>07712</u>	Purpose of Disbursement <u>Food-Drink</u>	Category/Type <u>007</u>
Candidate Name <u>Ernesto Cullari</u>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: <u>NJ</u> District: <u>06</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>478.51</u>
TOTAL This Period (last page this line number only).....	

12030850979

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

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

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

**A. Target**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**2331 Rt 66**

City **Ocean** State **NJ** Zip Code **07712**

Purpose of Disbursement  
**Office Supplies**

Candidate Name  
**Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement  
 M M / D D / Y Y Y Y  
**05 / 29 / 2012**

Amount of Each Disbursement this Period  
**33.96**

Category/Type  
**001**

**B. Cubacan**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**800 Ocean Ave**

City **Asbury Park** State **NJ** Zip Code **07712**

Purpose of Disbursement  
**Food-Drink**

Candidate Name  
**Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement  
 M M / D D / Y Y Y Y  
**05 / 31 / 2012**

Amount of Each Disbursement this Period  
**39.44**

Category/Type  
**007**

**C. Ivan and Andys**

Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address  
**508 Cockman Ave**

City **Asbury Park** State **NJ** Zip Code **07712**

Purpose of Disbursement  
**Dinner Meeting**

Candidate Name  
**Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement  
 M M / D D / Y Y Y Y  
**05 / 31 / 2012**

Amount of Each Disbursement this Period  
**145.14**

Category/Type  
**007**

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

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

**215.54**

1203085080

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 35

17  
20a     18  
20b     19a  
20c     19b  
21

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

**A.** Wawa  
Mailing Address: 14 Bridge St.  
City: Red Bank State: NJ Zip Code: 07701  
Purpose of Disbursement: Food-Drink Category/Type: 007  
Candidate Name: Ernesto Cullari  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: NJ District: 06  
Date of Disbursement: 05/29/2012  
Amount of Each Disbursement this Period: 36.28

**B.** Wawa  
Mailing Address: 14 Bridge St.  
City: Red Bank State: NJ Zip Code: 07701  
Purpose of Disbursement: Food-Drink Category/Type: 007  
Candidate Name: Ernesto Cullari  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: NJ District: 06  
Date of Disbursement: 05/29/2012  
Amount of Each Disbursement this Period: 5.35

**C.** City of Asbury Park  
Mailing Address: 1 Municipal Plz  
City: Asbury Park State: NJ Zip Code: 07712  
Purpose of Disbursement: Parking Cost Category/Type: 002  
Candidate Name: Ernesto Cullari  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: NJ District: 06  
Date of Disbursement: 05/29/2012  
Amount of Each Disbursement this Period: 5.00

SUBTOTAL of Disbursements This Page (optional) ..... 46.63  
TOTAL This Period (last page this line number only) .....

12050850981



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 35

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. PC Richard Son

Date of Disbursement

05 / 29 / 2012

Mailing Address

90 RT 36

Amount of Each Disbursement this Period

5349

City

Eaton town

State

NJ

Zip Code

07724

Purpose of Disbursement

Office Supplies

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. Manmouth Race Track

Date of Disbursement

09 / 20 / 2012

Mailing Address

175 Oceanport Ave

Amount of Each Disbursement this Period

4300

City

Oceanport

State

NJ

Zip Code

07757

Purpose of Disbursement

Food - Drink

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. Rite Aid

Date of Disbursement

05 / 20 / 2012

Mailing Address

75 S Main St.

Amount of Each Disbursement this Period

1097

City

Nephtane City

State

NJ

Zip Code

07153

Purpose of Disbursement

Office Supplies

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

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

10746

12030850982

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 35

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

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. Mc Donalds

Date of Disbursement

06 / 05 / 2012

Mailing Address

18 RT 35

Amount of Each Disbursement this Period

918

City

Eatontown

State

NJ

Zip Code

07724

Purpose of Disbursement

Food - Drink

007

Category/  
Type

Candidate Name

Ernesto Cullari

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. Walmart

Date of Disbursement

05 / 29 / 2012

Mailing Address

326 W Main St

Amount of Each Disbursement this Period

90.93

City

Freehold

State

NJ

Zip Code

07728

Purpose of Disbursement

Phones

001

Category/  
Type

Candidate Name

Ernesto Cullari

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. Lush

Date of Disbursement

05 / 29 / 2012

Mailing Address

644 Cookman Ave

Amount of Each Disbursement this Period

46.21

City

Asbury Park

State

NJ

Zip Code

07712

Purpose of Disbursement

Food - Drink

007

Category/  
Type

Candidate Name

Ernesto Cullari

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

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

19632

12030805071

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 35

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

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. Krauzers

Date of Disbursement

06 / 05 / 2012

Mailing Address

315 Main St

City

Neptune City

State

NJ

Zip Code

07753

Purpose of Disbursement

Food-Drink

Amount of Each Disbursement this Period

1338

Candidate Name

Ernesto Cullari

007

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. BP Gas

Date of Disbursement

06 / 05 / 2012

Mailing Address

20 Main St

City

Asbury Park

State

NJ

Zip Code

07712

Purpose of Disbursement

Gas

Amount of Each Disbursement this Period

1050

Candidate Name

Ernesto Cullari

007

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. BP Gas

Date of Disbursement

06 / 05 / 2012

Mailing Address

20 Main St

City

Asbury Park NJ 07712

Purpose of Disbursement

Gas

Amount of Each Disbursement this Period

3790

Candidate Name

Ernesto Cullari

002

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

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

6178

12030850984

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 35

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

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Target

MM / DD / YYYY  
05 / 25 / 2001

Mailing Address

2331 Rt 66

Amount of Each Disbursement this Period

City

Ocean

State

NJ

Zip Code

07112

7309

Purpose of Disbursement

Office Supplies

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Walmart

MM / DD / YYYY  
05 / 29 / 2012

Mailing Address

326 W Main St

Amount of Each Disbursement this Period

City

Freehold

State

NJ

Zip Code

07729

20886

Purpose of Disbursement

Phones

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Walmart

MM / DD / YYYY  
06 / 05 / 2012

Mailing Address

13575 Rt 66

Amount of Each Disbursement this Period

City

Neptune

State

NJ

Zip Code

07753

42.78

Purpose of Disbursement

Phones

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

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

32473

12030850985

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 36

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

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>A. Rite Aid</u>		Date of Disbursement <u>05/24/2012</u>
Mailing Address <u>75 S Main St.</u>		Amount of Each Disbursement this Period <u>44.21</u>
City <u>Neptune City</u>	State <u>NJ</u> Zip Code <u>07753</u>	
Purpose of Disbursement <u>office supplies</u>		Category/ Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>B. Americas Cup</u>		Date of Disbursement <u>05/24/2012</u>
Mailing Address <u>633 Cookman Ave</u>		Amount of Each Disbursement this Period <u>1338</u>
City <u>Asbury Park</u>	State <u>NJ</u> Zip Code <u>07712</u>	
Purpose of Disbursement <u>Food-Drink</u>		Category/ Type <u>007</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>C. Roxio</u>		Date of Disbursement <u>05/25/2012</u>
Mailing Address <u>455 El Camion Real</u>		Amount of Each Disbursement this Period <u>149.99</u>
City <u>Santa Clara</u>	State <u>CA</u> Zip Code <u>95050</u>	
Purpose of Disbursement <u>Software</u>		Category/ Type <u>001</u>
Candidate Name <u>Ernesto Cullari</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

SUBTOTAL of Disbursements This Page (optional).....	<u>20758</u>
TOTAL This Period (last page this line number only).....	

12030850986

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>13</u> OF <u>35</u>	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (in Full)  
**Cullari for Congress**

Full Name (Last, First, Middle Initial) <b>A. Synaxis</b>		Date of Disbursement MM/DD/YYYY <b>05/23/2012</b>
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>371.9</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Purpose of Disbursement <b>Food - Drink</b>		Category/ Type <b>007</b>
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>B. Adobe Systems</b>		Date of Disbursement MM/DD/YYYY <b>05/23/2012</b>
Mailing Address <b>345 Park Ave</b>		Amount of Each Disbursement this Period <b>19.99</b>
City <b>San Jose</b>	State <b>CA</b>	
Purpose of Disbursement <b>Software</b>		Category/ Type <b>001</b>
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>C. Brickwall</b>		Date of Disbursement MM/DD/YYYY <b>05/24/2012</b>
Mailing Address <b>522 Cookman Ave</b>		Amount of Each Disbursement this Period <b>76.74</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Purpose of Disbursement <b>Food - Drink</b>		Category/ Type <b>007</b>
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

SUBTOTAL of Disbursements This Page (optional).....	<b>1339.2</b>
TOTAL This Period (last page this line number only).....	

12030850987

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 35

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. Leak Oil

Date of Disbursement

05 / 22 / 2012

Mailing Address

4501 Stetson Rd

Amount of Each Disbursement this Period

3872

City

South Plainfield

State

NJ

Zip Code

07080

Purpose of Disbursement

Gas

002

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. It's Greek to me

Date of Disbursement

05 / 22 / 2012

Mailing Address

2129 state rt 35

Amount of Each Disbursement this Period

3336

City

Holmdel

State

NJ

Zip Code

07733

Purpose of Disbursement

Food - Drink

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. USPS

Date of Disbursement

05 / 22 / 2012

Mailing Address

60 3rd Ave

Amount of Each Disbursement this Period

1895

City

Long Branch

State

NJ

Zip Code

07740

Purpose of Disbursement

Postage

001

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

9103

1203085098

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

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

FOR LINE NUMBER: (check only one)  
 17  
 18  
 19a  
 19b  
 20a  
 20b  
 20c  
 21

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

**A. Cote Media**

Full Name (Last, First, Middle Initial) **Cote Media**

Mailing Address **Harding Ad**

City **Red Bank** State **NJ** Zip Code **07701**

Purpose of Disbursement **Advertising** Category/Type **004**

Candidate Name **Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement **05/22/2012**

Amount of Each Disbursement this Period **50.00**

**B. Hess Gas**

Full Name (Last, First, Middle Initial) **Hess Gas**

Mailing Address **1011 Main St**

City **Bradley Beach** State **NJ** Zip Code **07720**

Purpose of Disbursement **Gas** Category/Type **002**

Candidate Name **Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement **05/22/2012**

Amount of Each Disbursement this Period **45.00**

**C. Pay Pal**

Full Name (Last, First, Middle Initial) **Pay Pal**

Mailing Address **2211 N. 1st St**

City **San Jose** State **CA** Zip Code **95131**

Purpose of Disbursement **Fee** Category/Type **603**

Candidate Name **Ernesto Cullari**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: **NJ** District: **06**

Date of Disbursement **05/22/2012**

Amount of Each Disbursement this Period **37.95**

**SUBTOTAL** of Disbursements This Page (optional) **132.95**

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

12030850989



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Radio Shack

Mailing Address: 67 S Main St

City: Neptune City NJ Zip Code: 07753

Purpose of Disbursement: Video Equipment

Candidate Name: Ernesto Cullari

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: NJ District: 06

05 / 18 / 2012

Amount of Each Disbursement this Period

32.09

001

Category/Type

B. Gabriele's Grill

Mailing Address: 1351 Centennial Ave

City: Piscataway NJ Zip Code: 08854

Purpose of Disbursement: Meeting

Candidate Name: Ernesto Cullari

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: NJ District: 06

Date of Disbursement

05 / 21 / 2012

Amount of Each Disbursement this Period

113.36

007

Category/Type

C. Dunkin Donuts

Mailing Address: 2007

City: South Plainfield NJ Zip Code: 07080

Purpose of Disbursement: Food-Drink

Candidate Name: Ernesto Cullari

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: NJ District: 06

Date of Disbursement

05 / 21 / 2012

Amount of Each Disbursement this Period

27.43

007

Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

172.88

12030850990

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Synaxis</b>		Date of Disbursement <b>05/21/2012</b>
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>103.52</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>007</b>
Purpose of Disbursement <b>Food- Drink</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. Dublin House</b>		Date of Disbursement <b>05/07/2012</b>
Mailing Address <b>30 <del>Asbury</del> Monmouth St</b>		Amount of Each Disbursement this Period <b>15.707</b>
City <b>Red Bank</b>	State <b>NJ</b>	
Zip Code <b>07701</b>		Category/ Type <b>007</b>
Purpose of Disbursement <b>Dinner Meeting</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. Sign Rocket</b>		Date of Disbursement <b>05/18/2012</b>
Mailing Address <b>340 Broadway</b>		Amount of Each Disbursement this Period <b>3600.00</b>
City <b>St. Paul Park</b>	State <b>NJ</b>	
Zip Code <b>07071</b>		Category/ Type <b>006</b>
Purpose of Disbursement <b>Yard Signs</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>3860.59</b>
TOTAL This Period (last page this line number only).....	

12030850991

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Synaxis</b>		Date of Disbursement <b>05 20 2012</b>	
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>141.77</b>	
City <b>Asbury Park</b>	State <b>NJ</b>		Zip Code <b>07712</b>
Purpose of Disbursement <b>Food-Drink / meeting</b>	Category/ Type <b>007</b>		
Candidate Name <b>Ernest Cullari</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

Full Name (Last, First, Middle Initial) <b>B. Synaxis</b>		Date of Disbursement <b>05 29 2012</b>	
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>146.12</b>	
City <b>Asbury Park</b>	State <b>NJ</b>		Zip Code <b>07712</b>
Purpose of Disbursement <b>Food-Drink / meeting</b>	Category/ Type <b>007</b>		
Candidate Name <b>Ernesto Cullari</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

Full Name (Last, First, Middle Initial) <b>C. Synaxis</b>		Date of Disbursement <b>05 22 2012</b>	
Mailing Address <b>660 Cookman Ave</b>		Amount of Each Disbursement this Period <b>52.97</b>	
City <b>Asbury Park</b>	State <b>NJ</b>		Zip Code <b>07712</b>
Purpose of Disbursement <b>Food-Drink / meeting</b>	Category/ Type <b>007</b>		
Candidate Name <b>Ernesto Cullari</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

SUBTOTAL of Disbursements This Page (optional) ..... **340.86**

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

12030850992

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 35

17  
20a     18  
20b     19a  
20c     19b  
21

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

**A.** Synaxis

Mailing Address

660 Cookman Ave

City

Asbury Park

State

NJ

Zip Code

07712

Purpose of Disbursement

Food-Drink / meeting

007

Candidate Name

Ernest Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State: NJ

District: 06

Date of Disbursement

06.07.2012

Amount of Each Disbursement this Period

334.84

**B.** Synaxis

Mailing Address

660 Cookman Ave

City

Asbury Park

State

NJ

Zip Code

07712

Purpose of Disbursement

Food-Drink / meeting

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State: NJ

District: 06

Date of Disbursement

05.29.2012

Amount of Each Disbursement this Period

24.05

**C.** Synaxis

Mailing Address

660 Cookman Ave

City

Asbury Park

State

NJ

Zip Code

07712

Purpose of Disbursement

Food-Drink / meeting

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary     General  
 Other (specify)

State: NJ

District: 06

Date of Disbursement

05.29.2012

Amount of Each Disbursement this Period

133.42

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

492.31

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

12030850993

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 35

17  
20a  18  
20b  19a  
20c  19b  
21

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. Dunkin Douts

Date of Disbursement

06 07 2012

Mailing Address

20 Main St.

City

Asbury Park

State

NJ

Zip Code

07712

Amount of Each Disbursement this Period

2.24

Purpose of Disbursement

Food - Drink

007

Candidate Name

Ernest Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. City of Asbury Park

Date of Disbursement

05 29 2012

Mailing Address

1 Municipal Plz.

City

Asbury Park

State

NJ

Zip Code

07712

Amount of Each Disbursement this Period

10.00

Purpose of Disbursement

Parking Cost

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. Luigis Pizza

Date of Disbursement

06 07 2012

Mailing Address

35 S Main St.

City

Neptune

State

NJ

Zip Code

07753

Amount of Each Disbursement this Period

80.00

Purpose of Disbursement

Food - Drink

007

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

92.24

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

12030850994

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)

A. <b>City of Asbury Park</b>		Date of Disbursement
Mailing Address <b>1 Municipal Plz.</b>		<b>09 31 2012</b>
City <b>Asbury Park</b>	State <b>NJ</b>	Zip Code <b>07712</b>
Purpose of Disbursement <b>Parking Cost</b>		Amount of Each Disbursement this Period
Candidate Name <b>Ernest Cullari</b>		<b>2.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>002</b>
State: <b>NJ</b> District: <b>06</b>		

B. <b>City of Asbury Park</b>		Date of Disbursement
Mailing Address <b>1 Municipal Plz</b>		<b>09 31 2012</b>
City <b>Asbury Park</b>	State <b>NJ</b>	Zip Code <b>07712</b>
Purpose of Disbursement <b>Parking Cost</b>		Amount of Each Disbursement this Period
Candidate Name <b>Ernesto Cullari</b>		<b>4.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>002</b>
State: <b>NJ</b> District: <b>06</b>		

C. <b>City of Asbury Park</b>		Date of Disbursement
Mailing Address <b>1 Municipal Plz</b>		<b>09 29 2012</b>
City <b>Asbury Park</b>	State <b>NJ</b>	Zip Code <b>07712</b>
Purpose of Disbursement <b>Parking Cost</b>		Amount of Each Disbursement this Period
Candidate Name <b>Ernesto Cullari</b>		<b>10.00</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>002</b>
State: <b>NJ</b> District: <b>06</b>		

SUBTOTAL of Disbursements This Page (optional) .....	<b>16.00</b>
TOTAL This Period (last page this line number only) .....	

12030850995

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. City of Asbury Park</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>1 Municipal Plz.</b>		Amount of Each Disbursement this Period  <b>5.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		
Purpose of Disbursement <b>Parking Cost</b>		Category/ Type <b>002</b>
Candidate Name <b>Ernest Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>B. City of Asbury Park</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>1 Municipal Plz</b>		Amount of Each Disbursement this Period  <b>10.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		
Purpose of Disbursement <b>Parking Cost</b>		Category/ Type <b>002</b>
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>C. City of Asbury Park</b>		Date of Disbursement <b>05 31 2012</b>
Mailing Address <b>Municipal Plz</b>		Amount of Each Disbursement this Period  <b>2.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		
Purpose of Disbursement <b>Parking Cost</b>		Category/ Type <b>002</b>
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

SUBTOTAL of Disbursements This Page (optional) .....	<b>17.00</b>
TOTAL This Period (last page this line number only) .....	

12030850996

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Cullari for Congress

Full Name (Last, First, Middle Initial)

A. City of Asbury Park

Date of Disbursement

06 04 2012

Mailing Address

1 Municipal Plz.

City

Asbury Park

State

NJ

Zip Code

07712

Amount of Each Disbursement this Period

2.00

Purpose of Disbursement

Parking Cost

002

Candidate Name

Ernest Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

B. City of Asbury Park

Date of Disbursement

06 04 2012

Mailing Address

1 Municipal Plz.

City

Asbury Park

State

NJ

Zip Code

07712

Amount of Each Disbursement this Period

4.00

Purpose of Disbursement

Parking Cost

002

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

Full Name (Last, First, Middle Initial)

C. City of Asbury Park

Date of Disbursement

06 04 2012

Mailing Address

1 Municipal Plz.

City

Asbury Park

State

NJ

Zip Code

07712

Amount of Each Disbursement this Period

5.00

Purpose of Disbursement

Parking Cost

002

Candidate Name

Ernesto Cullari

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: NJ

District: 06

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

11.00

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

12030850997



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)

Cullari for Congress

Full Name (Last, First, Middle Initial)

<p>A. City of Asbury Park</p> <p>Mailing Address 1 Municipal Plz.</p> <p>City: Asbury Park State: NJ Zip Code: 07712</p> <p>Purpose of Disbursement: Parking Cost</p> <p>Candidate Name: Ernest Cullari</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: NJ District: 06</p>		<p>Date of Disbursement: 06 06 2012</p> <p>Amount of Each Disbursement this Period: 5.00</p> <p>Category/Type: 002</p>
<p>B. City of Asbury Park</p> <p>Mailing Address 1 Municipal Plz.</p> <p>City: Asbury Park State: NJ Zip Code: 07712</p> <p>Purpose of Disbursement: Parking Cost</p> <p>Candidate Name: Ernesto Cullari</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: NJ District: 06</p>		<p>Date of Disbursement: 06 06 2012</p> <p>Amount of Each Disbursement this Period: 10.00</p> <p>Category/Type: 002</p>
<p>C. City of Asbury Park</p> <p>Mailing Address 1 Municipal Plz.</p> <p>City: Asbury Park State: NJ Zip Code: 07760</p> <p>Purpose of Disbursement: Parking Cost</p> <p>Candidate Name: Ernesto Cullari</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>State: NJ District: 06</p>		<p>Date of Disbursement: 06 04 2012</p> <p>Amount of Each Disbursement this Period: 1.00</p> <p>Category/Type: 002</p>

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

16.00

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

12030850998

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. City of Asbury Park</b>		Date of Disbursement <b>06.07.2012</b>
Mailing Address <b>1 Municipal Plz.</b>		Amount of Each Disbursement this Period <b>4.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>002</b>
Purpose of Disbursement <b>Parking Cost</b>		
Candidate Name <b>Ernest Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. City of Asbury Park</b>		Date of Disbursement <b>06.07.2012</b>
Mailing Address <b>1 Municipal Plz</b>		Amount of Each Disbursement this Period <b>10.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>002</b>
Purpose of Disbursement <b>Parking Cost</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. City of Asbury Park</b>		Date of Disbursement <b>06.07.2012</b>
Mailing Address <b>1 Municipal Plz</b>		Amount of Each Disbursement this Period <b>10.00</b>
City <b>Asbury Park</b>	State <b>NJ</b>	
Zip Code <b>07712</b>		Category/ Type <b>002</b>
Purpose of Disbursement <b>Parking Cost</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>24.00</b>
TOTAL This Period (last page this line number only).....	

12030850999

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

PAGE 26 OF 36

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

Full Name (Last, First, Middle Initial) <b>A. Ernesto Cullari</b>		Date of Disbursement <b>05 29 2012</b>	
Mailing Address <b>610 Cookman Ave Suite A</b>		Amount of Each Disbursement this Period <b>855.00</b>	
City <b>Asbury Park</b>	State <b>NJ</b>		Zip Code <b>07712</b>
Purpose of Disbursement <b>Reimbursement / video camera</b>			Category/ Type <b>001</b>
Candidate Name <b>Ernest Cullari</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

Full Name (Last, First, Middle Initial) <b>B. Cuban</b>		Date of Disbursement <b>06 11 2012</b>	
Mailing Address <b>800 Ocean Ave</b>		Amount of Each Disbursement this Period <b>7.00</b>	
City <b>Asbury Park</b>	State <b>NJ</b>		Zip Code <b>07712</b>
Purpose of Disbursement <b>Food - Drink</b>			Category/ Type <b>007</b>
Candidate Name <b>Ernesto Cullari</b>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

Full Name (Last, First, Middle Initial) <b>C. Dunkin Donuts</b>		Date of Disbursement <b>06 07 2012</b>	
Mailing Address <b>2903 State Rt 23</b>		Amount of Each Disbursement this Period <b>2.24</b>	
City <b>New Foundland</b>	State <b>NJ</b>		Zip Code <b>07435</b>
Purpose of Disbursement <b>Food - Drink</b>			Category/ Type <b>007</b>
Candidate Name <b>Ernesto Cullari</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: <b>NJ</b> District: <b>06</b>			

SUBTOTAL of Disbursements This Page (optional).....	<b>864.24</b>
TOTAL This Period (last page this line number only).....	

12030851000

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 27 OF 36
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Daniella Chiulli</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>15 Lake Ave</b>		Amount of Each Disbursement this Period <b>40.00</b>
City <b>Hazlet</b>	State <b>NJ</b>	
Zip Code <b>07703</b>		Category/Type <b>001</b>
Purpose of Disbursement <b>Phone Bank</b>		
Candidate Name <b>Ernest Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>B. Rob Rogers</b>		Date of Disbursement <b>06 05 2012</b>
Mailing Address <b>306 White Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Jackson</b>	State <b>NJ</b>	
Zip Code <b>08527</b>		Category/Type <b>001</b>
Purpose of Disbursement <b>Phone Bank</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>C. UPT Strategies</b>		Date of Disbursement <b>05 22 2012</b>
Mailing Address <b>PO Box 31403</b>		Amount of Each Disbursement this Period <b>362.50</b>
City <b>Charleston</b>	State <b>SC</b>	
Zip Code <b>29417</b>		Category/Type <b>006</b>
Purpose of Disbursement <b>Post Cards</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: <b>NJ</b> District: <b>06</b>		

SUBTOTAL of Disbursements This Page (optional).....	<b>452.50</b>
TOTAL This Period (last page this line number only).....	

12030851001

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Janine McKay</b>		Date of Disbursement <b>06 05 2012</b>
Mailing Address <b>1830 Campbell Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b>	
Zip Code <b>07719</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Phone Bank</b>		
Candidate Name <b>Ernest Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. Janine McKay</b>		Date of Disbursement <b>06 05 2012</b>
Mailing Address <b>1830 Campbell Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b>	
Zip Code <b>07719</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Phone Bank</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. Daniela Chiulli</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>15 Lake Ave</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Hazlet</b>	State <b>NJ</b>	
Zip Code <b>07703</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Phone Bank</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>150.00</b>
TOTAL This Period (last page this line number only).....	

12030851002

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Brett Whelan</b>		Date of Disbursement <b>06 01 2012</b>
Mailing Address <b>1331 Campbell Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Candidate Name <b>Ernest Cullari</b>	001 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>B. Brett Whelan</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>1331 Campbell Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Candidate Name <b>Ernesto Cullari</b>	001 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>C. Brett Whelan</b>		Date of Disbursement <b>06 05 2012</b>
Mailing Address <b>1331 Campbell Rd</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Candidate Name <b>Ernesto Cullari</b>	001 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

SUBTOTAL of Disbursements This Page (optional).....	<b>150.00</b>
TOTAL This Period (last page this line number only).....	

12030851003

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <b>30</b> OF <b>35</b>
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Cullari For Congress**

Full Name (Last, First, Middle Initial) <b>A. Brett Whelan</b>		Date of Disbursement <b>06 05 2012</b>
Mailing Address <del>1830 Campbell Rd</del> <b>1830 Campbell Rd</b>		Amount of Each Disbursement this Period  <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Category/Type <b>001</b>	
Candidate Name <b>Ernest Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>B. Janine McKay</b>		Date of Disbursement <b>06 01 2012</b>
Mailing Address <b>1830 Campbell Rd</b>		Amount of Each Disbursement this Period  <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Category/Type <b>001</b>	
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

Full Name (Last, First, Middle Initial) <b>C. Janine McKay</b>		Date of Disbursement <b>06 04 2012</b>
Mailing Address <b>1830 Campbell Rd</b>		Amount of Each Disbursement this Period  <b>50.00</b>
City <b>Wall</b>	State <b>NJ</b> Zip Code <b>07719</b>	
Purpose of Disbursement <b>Phone Bank</b>	Category/Type <b>001</b>	
Candidate Name <b>Ernesto Cullari</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>NJ</b> District: <b>06</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

12030851004

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>A. Fitzsimmons Communications</u>		Date of Disbursement <u>06.14.2012</u>
Mailing Address <u>PO Box 353</u>		Amount of Each Disbursement this Period  <u>2,760.00</u>
City <u>Marlton</u>	State <u>NJ</u>	
Zip Code <u>07747</u>		Category/ Type <u>004</u>
Purpose of Disbursement <u>Robo Call Service</u>		
Candidate Name <u>Ernest Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>B. Cote Media</u>		Date of Disbursement <u>05.29.2012</u>
Mailing Address <u>1 Harding Rd. #102</u>		Amount of Each Disbursement this Period  <u>4,000.00</u>
City <u>Red Bank</u>	State <u>NJ</u>	
Zip Code <u>07701</u>		Category/ Type <u>004</u>
Purpose of Disbursement <u>Advertising</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>c. Jeremy Papa</u>		Date of Disbursement <u>05.21.2012</u>
Mailing Address <u>708 West Park Ave</u>		Amount of Each Disbursement this Period  <u>100.00</u>
City <u>Oakhurst</u>	State <u>NJ</u>	
Zip Code <u>07755</u>		Category/ Type <u>001</u>
Purpose of Disbursement <u>Salary</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>3,860.00</u>
TOTAL This Period (last page this line number only).....	

12030851005



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
Cullari for Congress

Full Name (Last, First, Middle Initial) <u>A. Mike Ward</u>		Date of Disbursement <u>05 20 2012</u>
Mailing Address <u>33 Moak Dr</u>		Amount of Each Disbursement this Period <u>100.00</u>
City <u>Hazlet</u>	State <u>NJ</u>	
Zip Code <u>07703</u>		Category/ Type <u>001</u>
Purpose of Disbursement <u>Salary</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>B. Mike Ward</u>		Date of Disbursement <u>05 28 2012</u>
Mailing Address <u>33 Moak Anne Dr</u>		Amount of Each Disbursement this Period <u>200.00</u>
City <u>Hazlet</u>	State <u>NJ</u>	
Zip Code <u>07703</u>		Category/ Type <u>001</u>
Purpose of Disbursement <u>Salary</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

Full Name (Last, First, Middle Initial) <u>C. Mike Ward</u>		Date of Disbursement <u>06 12 2012</u>
Mailing Address <u>33 Moak Dr</u>		Amount of Each Disbursement this Period <u>72.00</u>
City <u>Hazlet</u>	State <u>NJ</u>	
Zip Code <u>07703</u>		Category/ Type <u>001</u>
Purpose of Disbursement <u>Salary</u>		
Candidate Name <u>Ernesto Cullari</u>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>NJ</u> District: <u>06</u>	

SUBTOTAL of Disbursements This Page (optional).....	<u>372.00</u>
TOTAL This Period (last page this line number only).....	

12030851006

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <b>33</b> OF <b>36</b>
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Nikki Sanders</b>		Date of Disbursement MM/DD/YYYY <b>05/17/2012</b>
Mailing Address <b>138 S 7th Ave</b>		Amount of Each Disbursement this Period <b>119.20</b>
City <b>Manville</b>	State <b>NJ</b>	
Zip Code <b>08835</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Salary</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. Nikki Sanders</b>		Date of Disbursement MM/DD/YYYY <b>05/17/2012</b>
Mailing Address <b>138 S 7th Ave</b>		Amount of Each Disbursement this Period <b>17.85</b>
City <b>Manville</b>	State <b>NJ</b>	
Zip Code <b>08835</b>		Category/ Type <b>001</b>
Purpose of Disbursement <b>Salary</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. Mike Ward</b>		Date of Disbursement MM/DD/YYYY <b>05/12/2012</b>
Mailing Address <b>33 Moak Dr</b>		Amount of Each Disbursement this Period <b>50.00</b>
City <b>Hazlet</b>	State <b>NJ</b>	
Zip Code <b>07703</b>		Category/ Type <b>002</b>
Purpose of Disbursement <b>Travel Reimbursement</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>187.05</b>
TOTAL This Period (last page this line number only).....	

12030851007

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 35	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Cullari for Congress**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc.</b>		Date of Disbursement <b>05 ' 30 ' 2012</b>
Mailing Address <b>144 2nd St. 1st Floor</b>		Amount of Each Disbursement this Period <b>45.00</b>
City <b>San Francisco</b>	State <b>CA</b>	
Zip Code <b>94105</b>		Category/ Type <b>003</b>
Purpose of Disbursement <b>Service Fee</b>		
Candidate Name <b>Ernest Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc.</b>		Date of Disbursement <b>06 ' 07 ' 2012</b>
Mailing Address <b>144 2nd St. 1st Floor</b>		Amount of Each Disbursement this Period <b>1.13</b>
City <b>San Francisco</b>	State <b>CA</b>	
Zip Code <b>94105</b>		Category/ Type <b>003</b>
Purpose of Disbursement <b>Service Fee</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

Full Name (Last, First, Middle Initial) <b>C. Piryx Inc.</b>		Date of Disbursement <b>06 ' 08 ' 2012</b>
Mailing Address <b>144 2nd St. 1st Floor</b>		Amount of Each Disbursement this Period <b>8.10</b>
City <b>San Francisco</b>	State <b>CA</b>	
Zip Code <b>94105</b>		Category/ Type <b>003</b>
Purpose of Disbursement <b>Service Fee</b>		
Candidate Name <b>Ernesto Cullari</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>NJ</b> District: <b>06</b>	

SUBTOTAL of Disbursements This Page (optional).....	<b>5423</b>
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 77

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Callari for Congress

Full Name (Last, First, Middle Initial) <u>A. Pirx Inc</u>		Date of Disbursement MM/DD/YYYY <u>06/08/2012</u>
Mailing Address <u>144 2nd St 1st Floor</u>		Amount of Each Disbursement this Period <u>11.25</u>
City <u>San Francisco</u>	State <u>CA</u>	
Zip Code <u>94105</u>		Amount of Each Disbursement this Period <u>11.25</u>
Purpose of Disbursement <u>Service Fee</u>		
Candidate Name <u>Ernesto Callari</u>		Category/ Type <u>003</u>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>B. TD Bank</u>		Date of Disbursement MM/DD/YYYY <u>06/29/2012</u>
Mailing Address <u>101 Parker Ad</u>		Amount of Each Disbursement this Period <u>8.00</u>
City <u>West Long Branch</u>	State <u>NJ</u>	
Zip Code <u>07764</u>		Amount of Each Disbursement this Period <u>8.00</u>
Purpose of Disbursement <u>Bank Fee</u>		
Candidate Name <u>Ernesto Callari</u>		Category/ Type <u>001</u>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District: <u>06</u>		

Full Name (Last, First, Middle Initial) <u>C. TD Bank</u>		Date of Disbursement MM/DD/YYYY <u>05/31/2012</u>
Mailing Address <u>101 Parker Ad</u>		Amount of Each Disbursement this Period <u>8.00</u>
City <u>West Long Branch</u>	State <u>NJ</u>	
Zip Code <u>07764</u>		Amount of Each Disbursement this Period <u>8.00</u>
Purpose of Disbursement <u>Bank Fee</u>		
Candidate Name <u>Ernesto Callari</u>		Category/ Type <u>001</u>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <u>NJ</u> District:		

SUBTOTAL of Disbursements This Page (optional).....	<u>27.25</u>
TOTAL This Period (last page this line number only).....	<u>15,904.73</u>

12030851009

**FEC FORM 3Z (File with Form 3)**

**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <span style="font-size: 1.5em; font-family: cursive;">Cullari For Congress</span>	Report Covering Period: From: <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>	To: <span style="border: 1px solid black; padding: 2px;">06</span> / <span style="border: 1px solid black; padding: 2px;">30</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>
---	---	--

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
----------------	--	--

A <span style="font-size: 1.5em; font-family: cursive;">Cullari For Congress</span>	8480.00	0
---	---------	---

B Column Total Last Page Only.....	22235.83	200.00
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	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A	0.00	0.00	8480.00	0.00	0.00	0.00
B	0.00	50.93	22486.76	0.00	0.00	0.00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A	0.00	0.00	0.00	8480.00	15904.73	0.00
B	0.00	0.00	0.00	22486.76	21685.36	0.00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A	0.00	0.00	0.00	0.00	0.00	0.00
B	0.00	0.00	0.00	0.00	0.00	0.00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A	0.00	0.00	15904.73	8226.13	801.40	0.00
B	0.00	0.00	21685.36			
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A	0.00	8480.00	15904.73			
B		22486.76	21685.36			

12030851010

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

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USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked  
7/16/12

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*EV*  
PREPARER  
(3/2005)

7/17/12  
DATE PREPARED

110158905021