

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(d) 30-Day **POST-Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 02 / 01 / 2014 through 02 / 28 / 2014

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

Type or Print Name of Treasurer Mr Josef Schranz

Signature of Treasurer Mr Josef Schranz [Electronically Filed] Date 05 / 27 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NORPAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="271759.30"/> | <input type="text" value="271759.30"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="283000.06"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="106082.63"/> | <input type="text" value="172479.21"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="389082.69"/> | <input type="text" value="444238.51"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="48187.29"/> | <input type="text" value="103343.11"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="340895.40"/> | <input type="text" value="340895.40"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NORPAC

Report Covering the Period: From: M M / D D / Y Y Y Y 02 / 01 / 2014 To: M M / D D / Y Y Y Y 02 / 28 / 2014

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 106063.00 | 172438.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 106063.00 | 172438.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 106063.00 | 172438.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 19.63 | 41.21 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 106082.63 | 172479.21 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 106082.63 | 172479.21 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 15058.14 | 28113.96 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 15058.14 | 28113.96 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 32529.15 | 72829.15 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 1800.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 1800.00 |
| 29. Other Disbursements | 600.00 | 600.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 48187.29 | 103343.11 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 48187.29 | 103343.11 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 106063.00 | 172438.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 1800.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 106063.00 | 170638.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 15058.14 | 28113.96 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 15058.14 | 28113.96 |

: 97 `A -G7 9 @C B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: F3XA
Transaction ID :

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications such as ads are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E

Form/Schedule:
Transaction ID:

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
NORPAC

A. Steven Albertson
Full Name (Last, First, Middle Initial)

Mailing Address 3 Theodore Drive

City East Brunswick State NJ Zip Code 08816

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

Name of Employer U.S. Fire Insurance Company Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37504

Amount of Each Receipt this Period
200.00

Mission

B. Gila Alpert
Full Name (Last, First, Middle Initial)

Mailing Address 184 dwight pl

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Music Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11AI.37264

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 8107 Polk Drive

City Wharton State NJ Zip Code 07885

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37449

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 787 W. Broadway

City woodmere State NY Zip Code 11598

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

Name of Employer trolman, glaser, & lichtman p. Occupation attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11AI.37221

Amount of Each Receipt this Period
200.00

Mission

B. Daniel Amster
Full Name (Last, First, Middle Initial)

Mailing Address 16 Dale Drive

City West Orange State NJ Zip Code 07052

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

Name of Employer Inv Occupation Self

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11AI.37426

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 16 Dale Drive

City West Orange State NJ Zip Code 07052

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

Name of Employer Inv Occupation Self

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2014
Transaction ID : SA11AI.37429

Amount of Each Receipt this Period
75.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. rachel antosofsky | | Date of Receipt MM / DD / YYYY 02 / 26 / 2014 Transaction ID : SA11AI.37457 |
| Mailing Address 1335 fayette st | | Amount of Each Receipt this Period 350.00 |
| City teaneck | State NJ | Zip Code 07666 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer self | Occupation homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Debra Apfelbaum | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37374 |
| Mailing Address 3777 Independence Ave | | Amount of Each Receipt this Period 125.00 |
| City Riverdale | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Self | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Debra Apfelbaum | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37375 |
| Mailing Address 3777 Independence Ave | | Amount of Each Receipt this Period 75.00 |
| City Riverdale | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Self | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 550.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Harvey Atlas | | Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11AI.37242 |
| Mailing Address 5 Cellar Rd. | | Amount of Each Receipt this Period 125.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer self | Occupation dentist | Mission |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Barry Badner | | Date of Receipt MM / DD / YYYY 02 / 19 / 2014 Transaction ID : SA11AI.37215 |
| Mailing Address 261 Robin Rd. | | Amount of Each Receipt this Period 200.00 |
| City Englewood | State NJ | Zip Code 07631 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Zehar and Badner | Occupation Mgmt Consultant | Mission |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Irene Balsam | | Date of Receipt MM / DD / YYYY 02 / 20 / 2014 Transaction ID : SA11AI.37223 |
| Mailing Address 30 S Adelaide Ave, Apt 7C | | Amount of Each Receipt this Period 125.00 |
| City Highland Park | State NJ | Zip Code 08904 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Retired | Occupation Retired | Mission |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Shlomo Bar-Ayal
Full Name (Last, First, Middle Initial)
Mailing Address 370 Central Park West
City New York State NY Zip Code 10025
FEC ID number of contributing federal political committee. **C**
Name of Employer E-Tactics, Inc Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 14 / 2014
Transaction ID : SA11AI.37343
Amount of Each Receipt this Period 250.00
Mission

B. David Barach
Full Name (Last, First, Middle Initial)
Mailing Address 287 Cherry Ln
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Financial Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37400
Amount of Each Receipt this Period 125.00
Mission

C. David Baratz
Full Name (Last, First, Middle Initial)
Mailing Address 428 Walton St
City West Hempstead State NY Zip Code 11552
FEC ID number of contributing federal political committee. **C**
Name of Employer Angus Performance Advisors Occupation Business Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 05 / 2014
Transaction ID : SA11AI.37271
Amount of Each Receipt this Period 125.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. David Baratz
Full Name (Last, First, Middle Initial)

Mailing Address 428 Walton St

City West Hempstead State NY Zip Code 11552

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

Name of Employer Angus Performance Advisors Occupation Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014
Transaction ID : SA11AI.37272

Amount of Each Receipt this Period
75.00

Mission

B. Melvyn Barenholtz
Full Name (Last, First, Middle Initial)

Mailing Address 19 Cellar Rd.

City Edison State NJ Zip Code 08817

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

Name of Employer Self Occupation Computer analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11AI.37284

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 130 Dwight Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11AI.37220

Amount of Each Receipt this Period
400.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 13 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Howard Baruch

Mailing Address 130 Dwight Pl.

| | | |
|-------------------|-------------|-------------------|
| City Englewood | State NJ | Zip Code 07631 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------|
| Name of Employer Self | Occupation Physician |
|--------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 26 | / | 2014 |

Transaction ID : SA11AI.37247

Amount of Each Receipt this Period
2000.00

Donation

Full Name (Last, First, Middle Initial)
B. Andrew Becker

Mailing Address 38 Sullivan Dr

| | | |
|---------------------|-------------|-------------------|
| City West Orange | State NJ | Zip Code 07052 |
|---------------------|-------------|-------------------|

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

| | |
|------------------------|--------------------|
| Name of Employer MD | Occupation Self |
|------------------------|--------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 16 | / | 2014 |

Transaction ID : SA11AI.37360

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 873 Garrison Ave

| | | |
|-----------------|-------------|-------------------|
| City Teaneck | State NJ | Zip Code 07666 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|-----------------------|
| Name of Employer RYNJ | Occupation Teacher |
|--------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 28 | / | 2014 |

Transaction ID : SA11AI.37486

Amount of Each Receipt this Period
75.00

Mission

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2200.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Heather Benjamin
Full Name (Last, First, Middle Initial)

Mailing Address 873 Garrison Ave

City Teaneck State NJ Zip Code 07666

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

Name of Employer RYNJ Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37487

Amount of Each Receipt this Period
 125.00

Mission

B. Alan Berger
Full Name (Last, First, Middle Initial)

Mailing Address 24 Sutton Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37231

Amount of Each Receipt this Period
 225.00

Mission

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

Mailing Address 210 W. 89th St.

City New York State NY Zip Code 10024

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

Name of Employer self Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11AI.37472

Amount of Each Receipt this Period
 225.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 575.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 15 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Susan Berger

Mailing Address 746 Downing St.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
State of NJ Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37489

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Elliott Berman

Mailing Address 537 Rutland Avenue

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
IDT Corporation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37491

Amount of Each Receipt this Period
236.00

Mission

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

Mailing Address 11 Riverside Dr.

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Best Efforts Used to Obtain Best Efforts Used to Obtain

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37350

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 486.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Linda Blank
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Long Acre Rd
 City hillsborough State NJ Zip Code 08844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer na Occupation na
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37377
 Amount of Each Receipt this Period
 125.00
 Mission

B. Yehuda Blinder
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 Dwight Pl
 City Englewood State NJ Zip Code 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADAR Investment Mgmt Occupation Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.37149
 Amount of Each Receipt this Period
 200.00
 Mission

C. Robert block
 Full Name (Last, First, Middle Initial)
 Mailing Address 162 N. 10th Ave
 City highland park State NJ Zip Code 08904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer riverbed tech Occupation engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37362
 Amount of Each Receipt this Period
 125.00
 Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. ira Bloom
Full Name (Last, First, Middle Initial)

Mailing Address 34 lakeview dr

City west orange State NJ Zip Code 07052

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

Name of Employer westminster mngmt Occupation real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37376

Amount of Each Receipt this Period
 125.00

Mission

B. Benjamin Blumenthal
Full Name (Last, First, Middle Initial)

Mailing Address 230 Riverside Dr 2E

City New York State NY Zip Code 10025

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

Name of Employer Norman Bobrow Occupation Real Estate Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11AI.37342

Amount of Each Receipt this Period
 200.00

Mission

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

Mailing Address 452 Churchill Rd.

City Teaneck State NJ Zip Code 07666

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2014
Transaction ID : SA11AI.37440

Amount of Each Receipt this Period
 200.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 525.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 18 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. perry bolkin

Mailing Address 1-42 36th st

City fair lawn State NJ Zip Code 07410

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37199

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Gerold Borodach

Mailing Address 3801 Hudson Manor Terrace #4L

City Riverdale State NY Zip Code 10463

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

Name of Employer Self Occupation Retired MD - Anesthesiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.37155

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 412 Montgomery St.

City Highland Park State NJ Zip Code 08904

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37368

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Hannah-Jean Brafman | | Date of Receipt MM / DD / YYYY 02 / 20 / 2014 Transaction ID : SA11AI.37423 |
| Mailing Address 269 Fountain Rd | | Amount of Each Receipt this Period 125.00 |
| City Englewood | State NJ | Zip Code 07631 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Self | Occupation Psychologist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Hannah-Jean Brafman | | Date of Receipt MM / DD / YYYY 02 / 20 / 2014 Transaction ID : SA11AI.37424 |
| Mailing Address 269 Fountain Rd | | Amount of Each Receipt this Period 125.00 |
| City Englewood | State NJ | Zip Code 07631 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Self | Occupation Psychologist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Robert Braun | | Date of Receipt MM / DD / YYYY 02 / 16 / 2014 Transaction ID : SA11AI.37361 |
| Mailing Address 105 Lakeshore Dr | | Amount of Each Receipt this Period 225.00 |
| City Rockaway | State NJ | Zip Code 07866 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Picatinny Arsenal | Occupation Engineer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 475.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Deborah Braverman
Full Name (Last, First, Middle Initial)

Mailing Address 4664 Livingston Avenue

City Riverdale State NY Zip Code 10471

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37412

Amount of Each Receipt this Period
 75.00

Mission

B. Frank Breslau
Full Name (Last, First, Middle Initial)

Mailing Address 1319 Fayette Street

City Teaneck State NJ Zip Code 07666

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

Name of Employer IBM Occupation Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37212

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 25 Olden Road

City Edison State NJ Zip Code 08817

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

Name of Employer Self Occupation Investment Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37476

Amount of Each Receipt this Period
 250.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Joshua Caplan
Full Name (Last, First, Middle Initial)

Mailing Address 336 North 8th Ave.

City Edison State NJ Zip Code 08816

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

Name of Employer Time Warner Cable Occupation Ad Sales Exec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37447

Amount of Each Receipt this Period
 200.00

Mission

B. Sarit Catz
Full Name (Last, First, Middle Initial)

Mailing Address 11 Fairfield Dr

City Short Hills State NJ Zip Code 07078

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

Name of Employer Self Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37099

Amount of Each Receipt this Period
 1000.00

Conduit - Garrett

[MEMO ITEM]

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

Mailing Address 227 North Eighth Avenue

City Edison State NJ Zip Code 08817

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

Name of Employer The MITRE Corporation Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37402

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Michelle Chrein

Mailing Address 189 West 89th Street
Apt 6N

City New York State NY Zip Code 10024

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

Name of Employer Fragomen Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SA11AI.37148**

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Melvyn Ciment

Mailing Address 488 Cape May St

City Englewood State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014

Transaction ID : **SA11AI.37297**

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 76 Troy Dr

City Short Hills State NJ Zip Code 07078

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

Name of Employer Rock Properties Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014

Transaction ID : **SA11AI.37320**

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 23 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Janet Cohen

Mailing Address 17 East View Rd

City Monsey State NY Zip Code 10952

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37366

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Judith Cohen

Mailing Address 63 white drive

City Cedarhurst State NY Zip Code 11516

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

Name of Employer Townhouse management Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11AI.37470

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 3950 Blackstone Ave #6W

City Bronx State NY Zip Code 10471

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37245

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. William Cohen

Mailing Address 15 N. Southgate Drive

City Spring Valley State NY Zip Code 10977

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37379

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Stuart Cole

Mailing Address 2526 Stafford Place

City Columbus State OH Zip Code 43209

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

Name of Employer Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11AI.37431

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 34 Vista Drive

City Morganville State NJ Zip Code 07751

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

Name of Employer unemployed Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2014
Transaction ID : SA11AI.37346

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ava Cushner
Full Name (Last, First, Middle Initial)

Mailing Address 871 carol court

City Woodmere State NY Zip Code 11598

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

Name of Employer Steven Krauss DDS Occupation Dental Hygienist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.37502

Amount of Each Receipt this Period 200.00

Mission

B. moshe cyviner
Full Name (Last, First, Middle Initial)

Mailing Address 239 S. 6th Ave Apt 102

City Highland Park State NJ Zip Code 08904

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

Name of Employer Martin and Edith Stein Occupation Hospice Aide

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11AI.37246

Amount of Each Receipt this Period 125.00

Mission

c. Philip Darivoff
Full Name (Last, First, Middle Initial)

Mailing Address 1 farmstead rd

City short hills State NJ Zip Code 07078

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

Name of Employer Goldman Sachs Occupation Investment Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt 02 / 25 / 2014
Transaction ID : SA11AI.37103

Amount of Each Receipt this Period 1000.00

Conduit - Garrett

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
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| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Galina Datskovsky
Full Name (Last, First, Middle Initial)

Mailing Address 5 Chittenden Road

City Fair Lawn State NJ Zip Code 07410

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

Name of Employer Autonomy an hp company Occupation SVP Information Governance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11AI.37425

Amount of Each Receipt this Period
 250.00

Mission

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

Mailing Address 3 Rock Ridge Circle

City New Rochelle State NY Zip Code 10804

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

Name of Employer Deutsche Bank Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37363

Amount of Each Receipt this Period
 275.00

Mission

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

Mailing Address 285 Fountain Road

City Englewood State NJ Zip Code 07631

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

Name of Employer Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37358

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Joel Davidson
Full Name (Last, First, Middle Initial)

Mailing Address 25 Ellen Drive

City Rockaway State NJ Zip Code 07866

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

Name of Employer Occupation
AIG Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2014

Transaction ID : SA11AI.37395

Amount of Each Receipt this Period
125.00

Mission

B. Morton Dear
Full Name (Last, First, Middle Initial)

Mailing Address 3 Celler Rd.

City Edison State NJ Zip Code 08817

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

Name of Employer Occupation
n/a retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2014

Transaction ID : SA11AI.37169

Amount of Each Receipt this Period
250.00

Mission

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

Mailing Address 2 Cummings Circle

City West Orange State NJ Zip Code 07052

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

Name of Employer Occupation
na na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : SA11AI.37226

Amount of Each Receipt this Period
250.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 7000 Boulevard East
#128C

City State Zip Code
Guttenberg NJ 07093

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

Name of Employer Occupation
Self Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37296

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Lawrence Diener

Mailing Address 293 E. Palisade Avenue

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Self Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.37278

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 135 Valentine Street

City State Zip Code
Highland Park NJ 08904

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

Name of Employer Occupation
Self CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37393

Amount of Each Receipt this Period
250.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. hal dorfman
Full Name (Last, First, Middle Initial)

Mailing Address 620 W. 230th St

City New York State NY Zip Code 10463

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

Name of Employer Self Occupation Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2014
Transaction ID : SA11AI.37267

Amount of Each Receipt this Period
200.00

Mission

B. Deborah Druce
Full Name (Last, First, Middle Initial)

Mailing Address 15 Barbara Ave

City West Orange State NJ Zip Code 07052

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

Name of Employer Kushner Academy Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2014
Transaction ID : SA11AI.37303

Amount of Each Receipt this Period
250.00

Mission

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

Mailing Address 747 Livingston Road

City Elizabeth State NJ Zip Code 07208

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

Name of Employer Newark Public Schools Occupation Retired School Psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11AI.37460

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 133
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Susan Eleff

Mailing Address 12305 Kemp Mill Road

City Silver Spring State MD Zip Code 20902

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

Name of Employer Ballard Spahr Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37157

Amount of Each Receipt this Period
50.00

Mission

Full Name (Last, First, Middle Initial)
B. Herb Engel

Mailing Address 10 Perry Road

City Edison State NJ Zip Code 08817

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37205

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
c. Charles Epstein

Mailing Address 378 Gloucester St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37483

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
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| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Milton Erdfarb

Mailing Address 207 Cedar Avenue

City Highland Park State NJ Zip Code 08904

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

Name of Employer State of New York Occupation Civil Servant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37333

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Reuven Escott

Mailing Address 55 Regent St.

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Self Occupation Securities Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37195

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 44 West 62nd St.

City New York State NY Zip Code 10023

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

Name of Employer Acker & Li Occupation Businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2014
Transaction ID : SA11AI.37438

Amount of Each Receipt this Period
275.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
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| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. David Feuer
Full Name (Last, First, Middle Initial)

Mailing Address 376 Eton St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Astoria Surgical Occupation Surgical Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37311

Amount of Each Receipt this Period
125.00

Mission

B. Josh Fine
Full Name (Last, First, Middle Initial)

Mailing Address 611 South First Avenue

City Highland Park State NJ Zip Code 08904

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

Name of Employer AIG Occupation Claims Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37175

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 182 Hillside Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Emerging Growth Associates Occupation Technology Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11AI.37344

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Mollie Fisch
Full Name (Last, First, Middle Initial)
Mailing Address 300 Merrison Street
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Schering Plough Pharmaceuticals Occupation Pharmacist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11AI.37263
Amount of Each Receipt this Period 425.00
Mission

B. Susan Fisch
Full Name (Last, First, Middle Initial)
Mailing Address 78 Grayson Place
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer MediaKidz Occupation research assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11AI.37209
Amount of Each Receipt this Period 125.00
Mission

C. Susan Fishbein
Full Name (Last, First, Middle Initial)
Mailing Address 28 Mayhew Drive
City Livingston State NJ Zip Code 07039
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11AI.37442
Amount of Each Receipt this Period 275.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 825.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ellen Fisher
Full Name (Last, First, Middle Initial)

Mailing Address 50 Hamlin Road

City Edison State NJ Zip Code 08817

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

Name of Employer self Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37338

Amount of Each Receipt this Period
200.00

Mission

B. Lloyd Fishman
Full Name (Last, First, Middle Initial)

Mailing Address 412 Faletti Circle

City River Vale State NJ Zip Code 07675

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

Name of Employer Medical Devices Occupation VP, Business Dev & Mktg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37234

Amount of Each Receipt this Period
250.00

Earmark - Garrett

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

Mailing Address 3333 Henry Hudson Pky 4W

City Bronx State NY Zip Code 10463

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

Name of Employer Strategic Workforce Solutions Occupation Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37139

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. George Frankel
Full Name (Last, First, Middle Initial)

Mailing Address 50 Overlook Ter.
Apt. 6D

City New York State NY Zip Code 10033

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

Name of Employer Baruch College Occupation Computer Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
02 / 13 / 2014
Transaction ID : SA11AI.37329

Amount of Each Receipt this Period
125.00

Mission

B. Alan Freeman
Full Name (Last, First, Middle Initial)

Mailing Address 11 Page Pl

City Livingston State NJ Zip Code 07039

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

Name of Employer BB&B Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11AI.37196

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 449 Elkwood Terrace

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
02 / 21 / 2014
Transaction ID : SA11AI.37430

Amount of Each Receipt this Period
200.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 36 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Zina Freundlich
Full Name (Last, First, Middle Initial)
Mailing Address 38 Brookdale court
City Highland Park State NJ Zip Code 08904
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired social worker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 12 / 2014
Transaction ID : SA11AI.37178
Amount of Each Receipt this Period 125.00
Mission

B. Mort Fridman
Full Name (Last, First, Middle Initial)
Mailing Address 826 Winthrop Rd
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation MD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1164.00

Date of Receipt 02 / 13 / 2014
Transaction ID : SA11AI.37514
Amount of Each Receipt this Period 600.00
Conduit - Veasey
[MEMO ITEM]

C. Mort Fridman
Full Name (Last, First, Middle Initial)
Mailing Address 826 Winthrop Rd
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation MD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1289.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11AI.37213
Amount of Each Receipt this Period 125.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 37 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Ira Friedman

Mailing Address 130 Chadwick Road

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Metropolitan Life Insurance Co. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37158

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Ira Friedman

Mailing Address 130 Chadwick Road

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Metropolitan Life Insurance Co. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37256

Amount of Each Receipt this Period
250.00

Mission

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

Mailing Address 1372 Milford Terrace

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Self Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37327

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Henry Frisch | | Date of Receipt MM / DD / YYYY 02 / 13 / 2014 Transaction ID : SA11AI.37328 |
| Mailing Address 1372 Milford Terrace | | Amount of Each Receipt this Period 200.00 |
| City Teaneck | State NJ | Zip Code 07666 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Self | Occupation Writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Abraham Fuchs | | Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11AI.37324 |
| Mailing Address 147-12 78 Rd 1A | | Amount of Each Receipt this Period 125.00 |
| City Kew Gardens Hills | State NY | Zip Code 11367 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mathi Fuchs | | Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11AI.37292 |
| Mailing Address 8 Weber Road | | Amount of Each Receipt this Period 125.00 |
| City West Orange | State NJ | Zip Code 07052 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Frank Crystal & Co. | Occupation Insurance Broker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. arden fusman
Full Name (Last, First, Middle Initial)

Mailing Address 77 terrace ave

City west orange State NJ Zip Code 07052

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

Name of Employer kessel Occupation md

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37193

Amount of Each Receipt this Period
 275.00

Mission

B. Lawrence Garbuz
Full Name (Last, First, Middle Initial)

Mailing Address 194 Overlook Road

City New Rochelle State NY Zip Code 10804

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

Name of Employer Lewis and Garbuz, P.C. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37475

Amount of Each Receipt this Period
 200.00

Mission

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

Mailing Address 66 W. 94th St
5e

City NEw York State NY Zip Code 10025

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

Name of Employer Queens College Occupation Physicist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37477

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Giancarlo Genovesse

Mailing Address 749 N Main St

City Newark State NJ Zip Code 07107

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

Name of Employer self Occupation contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.37162

Amount of Each Receipt this Period
25.00

Mission

Full Name (Last, First, Middle Initial)
B. martin gewirtz

Mailing Address 84 remsen ave

City monsey State NY Zip Code 10952

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

Name of Employer self Occupation md

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **125.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.37299

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 15 Barlow Rd

City Edison State NJ Zip Code 08817

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

Name of Employer AT & T Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **125.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2014

Transaction ID : SA11AI.37306

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ **275.00**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Leonard Glass
Full Name (Last, First, Middle Initial)

Mailing Address 492 W Englewood Ave

City Teaneck State NJ Zip Code 07666

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

Name of Employer Morretec Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37446

Amount of Each Receipt this Period
 250.00

Mission

B. Ronald Gold
Full Name (Last, First, Middle Initial)

Mailing Address 43 Beverly Rd

City Hillsdale State NJ Zip Code 07642

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

Name of Employer Rising Pharmaceutical Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2014
Transaction ID : SA11AI.37232

Amount of Each Receipt this Period
 500.00

Earmark - Garrett

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

Mailing Address 686 Downing St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Tyco International Occupation Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37295

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 875.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jerry Golub
Full Name (Last, First, Middle Initial)

Mailing Address 10 Hillside Ave

City Roseland State NJ Zip Code 07068

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37479

Amount of Each Receipt this Period
 125.00

Mission

B. Anne Gontownik
Full Name (Last, First, Middle Initial)

Mailing Address 250 Mountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer none Occupation homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37287

Amount of Each Receipt this Period
 250.00

Mission

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

Mailing Address 250 Mountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Stone Post Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37189

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Daryl Goodman

Mailing Address 1910 E. Country Club Ct.

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Occupation
Unemployed NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37507

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Irene Gottesman

Mailing Address 285 Sunset Ave

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Self Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37319

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
C. Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Self CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37318

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Gabriel Gozland

Mailing Address 3240 Henry Hudson Parkway

| | | |
|-------------------|-------------|-------------------|
| City Riverdale | State NY | Zip Code 10463 |
|-------------------|-------------|-------------------|

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

| | |
|------------------------------------|------------------------|
| Name of Employer GMG Technology | Occupation engineer |
|------------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 23 | / | 2014 |

Transaction ID : SA11AI.37436

Amount of Each Receipt this Period
275.00

Mission

Full Name (Last, First, Middle Initial)
B. Mishel Greenberg

Mailing Address 291 Schley Pl

| | | |
|-----------------|-------------|-------------------|
| City Teaneck | State NJ | Zip Code 07666 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------|
| Name of Employer Self | Occupation Inv |
|--------------------------|-------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
72.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 28 | / | 2014 |

Transaction ID : SA11AI.37258

Amount of Each Receipt this Period
72.00

Mission

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

Mailing Address 40-19 Marie Cct

| | | |
|-------------------|-------------|-------------------|
| City fair lawn | State NJ | Zip Code 07410 |
|-------------------|-------------|-------------------|

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

| | |
|---|-------------------------------|
| Name of Employer professional software | Occupation comp consultant |
|---|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 13 | / | 2014 |

Transaction ID : SA11AI.37332

Amount of Each Receipt this Period
125.00

Mission

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 472.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Charles Gross | | Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11AI.37198 |
| Mailing Address 220 West 98th St #9D | | Amount of Each Receipt this Period 325.00 |
| City New York | State NY | Zip Code 10025 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Phipps House | Occupation Director, Commercial Leasing & Mgmt | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Reuben E. Gross | | Date of Receipt MM / DD / YYYY 02 / 24 / 2014 Transaction ID : SA11AI.37233 |
| Mailing Address 1299 Wellington Ave. | | Amount of Each Receipt this Period 150.00 |
| City Teaneck | State NJ | Zip Code 07666 |
| FEC ID number of contributing federal political committee. C | Earmark - Garrett | |
| Name of Employer Self | Occupation Psychologist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 150.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Elliot Grossman | | Date of Receipt MM / DD / YYYY 02 / 10 / 2014 Transaction ID : SA11AI.37286 |
| Mailing Address 2 Howell Dr. | | Amount of Each Receipt this Period 125.00 |
| City West Orange | State NJ | Zip Code 07052 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer self | Occupation physician | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 600.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Robert Grossman
Full Name (Last, First, Middle Initial)

Mailing Address 78 Winding Way

City West Orange State NJ Zip Code 07052

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

Name of Employer Fitch Ratings Occupation Financial Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.37269

Amount of Each Receipt this Period
 1000.00

Earmark - Garrett

B. Dan Gueron
Full Name (Last, First, Middle Initial)

Mailing Address 15 West 63rd St, Apt 21B

City New York State NY Zip Code 10023

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

Name of Employer ABS Development Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.37184

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

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

Mailing Address 3117 Palisade Ave

City Bronx State NY Zip Code 10463

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

Name of Employer AECOM Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.37396

Amount of Each Receipt this Period
 125.00

Mission

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2125.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Uri Gutfreund
Full Name (Last, First, Middle Initial)
Mailing Address 149 Sussex Road
City Bergenfield State NJ Zip Code 07621
FEC ID number of contributing federal political committee. **C**
Name of Employer Singer Nelson Charlmers Occupation Insurance Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11AI.37420
Amount of Each Receipt this Period 275.00
Mission

B. David Halpern
Full Name (Last, First, Middle Initial)
Mailing Address 8 Stonehenge Drive
City Livingston State NJ Zip Code 07039
FEC ID number of contributing federal political committee. **C**
Name of Employer Atlantic Realty Occupation Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37182
Amount of Each Receipt this Period 2000.00
Earmark - Landrieu

c. Jack Halpern
Full Name (Last, First, Middle Initial)
Mailing Address 160 W. 66th St.
City New York State NY Zip Code 10023
FEC ID number of contributing federal political committee. **C**
Name of Employer Atlantic Realty Occupation Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37188
Amount of Each Receipt this Period 5000.00
Earmark - Landrieu

SUBTOTAL of Receipts This Page (optional)..... ▶ 7275.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 48 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jeremy Halpern
Full Name (Last, First, Middle Initial)

Mailing Address 21 CARILLON CIRCLE

City Livingston State NJ Zip Code 07039

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

Name of Employer EDISON WOODS ASSOC Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37187

Amount of Each Receipt this Period
 2000.00

Earmark - Landrieu

B. Murray Halpern
Full Name (Last, First, Middle Initial)

Mailing Address 6 Thames Drive

City Livingston State NJ Zip Code 07039

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

Name of Employer Atlantic Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37181

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

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

Mailing Address 47 Leslie St.

City Edison State NJ Zip Code 08817

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

Name of Employer self Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37268

Amount of Each Receipt this Period
 250.00

Mission

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3250.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Marc Hanfling

Mailing Address 47 Leslie St.

City Edison State NJ Zip Code 08817

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

Name of Employer self Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37201

Amount of Each Receipt this Period
36.00

Mission

Full Name (Last, First, Middle Initial)
B. Jaime Hartman

Mailing Address 61 Paine Avenue

City New Rochelle State NY Zip Code 10804

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11AI.37282

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 61 Paine Avenue

City New Rochelle State NY Zip Code 10804

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11AI.37283

Amount of Each Receipt this Period
75.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 236.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 50 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Myriam Herman

Mailing Address 106 Lakeside Drive East

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Self Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37289

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Myriam Herman

Mailing Address 106 Lakeside Drive East

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Self Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37290

Amount of Each Receipt this Period
75.00

Mission

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

Mailing Address 310 Warwick Ave

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Ferro Labella & Zucker L.L.C. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37399

Amount of Each Receipt this Period
200.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Eric Herschmann
Full Name (Last, First, Middle Initial)

Mailing Address 210 Lavaca St.
Unit 1903

City Austin State TX Zip Code 78701

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

Name of Employer Kasowitz, Benson, Torres et al Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11AI.37159

Amount of Each Receipt this Period
5000.00

Mission

B. Rachel Hersey
Full Name (Last, First, Middle Initial)

Mailing Address 286 Booth Avenue

City Englewood State NJ Zip Code 07631

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

Name of Employer Ernst & Young Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014
Transaction ID : SA11AI.37160

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 25 Wood Lane

City Woodsburgh State NY Zip Code 11598

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

Name of Employer Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2014
Transaction ID : SA11AI.37313

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 5325.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Nancy Honig

Mailing Address 3240 Henry Hudson Pkwy

City State Zip Code
Bronx NY 10463

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

Name of Employer Occupation
na Librarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2014

Transaction ID : SA11AI.37224

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Deborah Horowitz

Mailing Address 354 winthrop rd

City State Zip Code
teaneck NJ 07666

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

Name of Employer Occupation
self occupational therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014

Transaction ID : SA11AI.37466

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 326 Winthrop Road

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Self Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014

Transaction ID : SA11AI.37301

Amount of Each Receipt this Period
75.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Samuel Jacob
Full Name (Last, First, Middle Initial)

Mailing Address 422 E72nd St, 19A

City New York State NY Zip Code 10021

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

Name of Employer SLJ Capital Partners LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37105

Amount of Each Receipt this Period
 1000.00

Conduit - Garrett

[MEMO ITEM]

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

Mailing Address 485 Kensington Rd.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Novartis Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37414

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 357 Edgewood Ave

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37496

Amount of Each Receipt this Period
 200.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Brian Jedwab
Full Name (Last, First, Middle Initial)

Mailing Address 25 bayberry road

City Lawrence State NY Zip Code 11559

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37172

Amount of Each Receipt this Period
 200.00

Mission

B. Howard Jonas
Full Name (Last, First, Middle Initial)

Mailing Address 3020 Palisade Ave.

City Bronx State NY Zip Code 10463

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

Name of Employer IDT Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11AI.37249

Amount of Each Receipt this Period
 5000.00

Earmark - Landrieu

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

Mailing Address 701 Ipsen St

City Woodmere State NY Zip Code 11598

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

Name of Employer Sherman & Sterling Occupation Senior Systems Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37317

Amount of Each Receipt this Period
 125.00

Mission

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5325.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 55 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Victor Kamensky
Full Name (Last, First, Middle Initial)

Mailing Address 679 West 239 Str # 4B

City State Zip Code
Bronx NY 10463

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

Name of Employer Occupation
Aecom Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2014

Transaction ID : SA11AI.37354

Amount of Each Receipt this Period
125.00

Mission

B. Harry Kanner
Full Name (Last, First, Middle Initial)

Mailing Address 218 Van Nostrand Ave.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Dennis Publishing, Inc. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2014

Transaction ID : SA11AI.37298

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 6 Opatut Ct.

City State Zip Code
Edison NJ 08817

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

Name of Employer Occupation
S&P Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2014

Transaction ID : SA11AI.37415

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 56 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 6 Opatut Ct.

City Edison State NJ Zip Code 08817

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

Name of Employer S&P Occupation Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37416

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Melissa Kapustin

Mailing Address 16 Westover Terr

City West Orange State NJ Zip Code 07052

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

Name of Employer The Rothenberg Law Firm LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37167

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 45 Thames Blvd

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Frisch School Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37394

Amount of Each Receipt this Period
525.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 57 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Josef Katz
Full Name (Last, First, Middle Initial)

Mailing Address 1069 Allesandrini Ave

City New Milford State NJ Zip Code 07646

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

Name of Employer StraighterLine Occupation Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2014

Transaction ID : SA11AI.37331

Amount of Each Receipt this Period
325.00

Mission

B. Monique Katz
Full Name (Last, First, Middle Initial)

Mailing Address 300 E Linden Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer Columbia Presbyterian Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2014

Transaction ID : SA11AI.37255

Amount of Each Receipt this Period
5000.00

Donation

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

Mailing Address 300 E. Linden Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2014

Transaction ID : SA11AI.37254

Amount of Each Receipt this Period
5000.00

Donation

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 10325.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Genee Kaye
Full Name (Last, First, Middle Initial)

Mailing Address 770 Downing Street

City Teaneck State NJ Zip Code 07666

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

Name of Employer YU Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.37273

Amount of Each Receipt this Period
 125.00

Mission

B. Michael Kazer
Full Name (Last, First, Middle Initial)

Mailing Address 227 Walnut St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.37237

Amount of Each Receipt this Period
 350.00

Mission

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

Mailing Address 18 Harrison Street

City Edison State NJ Zip Code 08817

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

Name of Employer Gold Lumber Co., Inc. Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2014

Transaction ID : SA11AI.37351

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 59 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Barbara Kessel | | Date of Receipt MM / DD / YYYY 02 / 16 / 2014 Transaction ID : SA11AI.37353 |
| Mailing Address 18 harrison st | | Amount of Each Receipt this Period 125.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Board of jewish education | Occupation Retiree | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Seymour Kessel | | Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11AI.37173 |
| Mailing Address 27 Marshall Drive | | Amount of Each Receipt this Period 125.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Credit Suisse | Occupation Accountant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Roberta Klafter | | Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11AI.37456 |
| Mailing Address 227 E Linden Ave | | Amount of Each Receipt this Period 125.00 |
| City Englewood | State NJ | Zip Code 07631 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer retired | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Martin Klein | | Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11AI.37176 |
| Mailing Address 56 hamlin rd | | Amount of Each Receipt this Period 125.00 |
| City edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer dan automotive | Occupation self | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. phillip klein | | Date of Receipt MM / DD / YYYY 02 / 23 / 2014 Transaction ID : SA11AI.37437 |
| Mailing Address 1292 mercedes st | | Amount of Each Receipt this Period 225.00 |
| City teaneck | State NJ | Zip Code 07666 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer medical diagnostic | Occupation md | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Jessica Kligman | | Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.37500 |
| Mailing Address 325 Felton Avenue | | Amount of Each Receipt this Period 125.00 |
| City Highland Park | State NJ | Zip Code 08904 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer self | Occupation homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 475.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jessica Kligman
Full Name (Last, First, Middle Initial)

Mailing Address 325 Felton Avenue

City Highland Park State NJ Zip Code 08904

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

Name of Employer self Occupation homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37503

Amount of Each Receipt this Period
 125.00

Mission

B. Ariel Kohane
Full Name (Last, First, Middle Initial)

Mailing Address 114 West 70th Street Apt. 6-A

City New York State NY Zip Code 10023

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

Name of Employer School For Int'l Teachers Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 75.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37492

Amount of Each Receipt this Period
 75.00

Mission

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

Mailing Address 32 Brookfall Road

City Edison State NJ Zip Code 08817

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

Name of Employer CNA Occupation Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37322

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Richard Kollmar
Full Name (Last, First, Middle Initial)

Mailing Address 32 Brookfall Road

City Edison State NJ Zip Code 08817

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

Name of Employer CNA Occupation Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.37323

Amount of Each Receipt this Period
 125.00

Mission

B. Asher Kornbluth
Full Name (Last, First, Middle Initial)

Mailing Address 197 Cedar St

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014

Transaction ID : SA11AI.37147

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 31 Foxburn St.

City New City State NY Zip Code 10956

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.37408

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ira Kornstein
Full Name (Last, First, Middle Initial)

Mailing Address 31 Foxburn St.

City New City State NY Zip Code 10956

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37410

Amount of Each Receipt this Period
 125.00

Mission

B. Esther Kosoffsky
Full Name (Last, First, Middle Initial)

Mailing Address 19 new dover road

City East Brunswick State NJ Zip Code 08816

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

Name of Employer Self Occupation Chef

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37326

Amount of Each Receipt this Period
 250.00

Mission

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

Mailing Address 62 Pomona Road

City Suffern State NY Zip Code 10901

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

Name of Employer Rockland Urology Associates Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37371

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Richard Kroll
Full Name (Last, First, Middle Initial)

Mailing Address 62 Pomona Road

City Suffern State NY Zip Code 10901

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

Name of Employer Rockland Urology Associates Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
02 / 25 / 2014
Transaction ID : SA11AI.37111

Amount of Each Receipt this Period
500.00

Conduit - Garrett

[MEMO ITEM]

B. Phyllis Krug
Full Name (Last, First, Middle Initial)

Mailing Address 465 ogden ave

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation physical therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
02 / 24 / 2014
Transaction ID : SA11AI.37444

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 200 Edgemont Pl

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75.00

Date of Receipt
02 / 18 / 2014
Transaction ID : SA11AI.37211

Amount of Each Receipt this Period
75.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 65 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Joshua Landes | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37190 |
| Mailing Address 740 W 232nd Street | | Amount of Each Receipt this Period 1000.00 |
| City Riverdale | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | Earmark - Landrieu | |
| Name of Employer Wynnefield Capital | Occupation Investment Management | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2125.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Joshua Landes | | Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11AI.37216 |
| Mailing Address 740 W 232nd Street | | Amount of Each Receipt this Period 500.00 |
| City Riverdale | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | Earmark - Everett Stern | |
| Name of Employer Wynnefield Capital | Occupation Investment Management | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2625.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Joshua Landes | | Date of Receipt MM / DD / YYYY 02 / 28 / 2014 Transaction ID : SA11AI.37261 |
| Mailing Address 740 W 232nd Street | | Amount of Each Receipt this Period 2000.00 |
| City Riverdale | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | Earmark - Elan Carr | |
| Name of Employer Wynnefield Capital | Occupation Investment Management | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4625.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Richard Langer
Full Name (Last, First, Middle Initial)

Mailing Address 1086 Lambert Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Hebrew Institute of Riverdale Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11AI.37419

Amount of Each Receipt this Period
 200.00

Mission

B. Robert Lansey
Full Name (Last, First, Middle Initial)

Mailing Address 17 Marshall Drive

City Edison State NJ Zip Code 08817

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

Name of Employer NYK Business Systems Americas, Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.37274

Amount of Each Receipt this Period
 250.00

Mission

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

Mailing Address 30 s adelaide ave

City highland park State NJ Zip Code 08904

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.37387

Amount of Each Receipt this Period
 125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 575.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Steven Lefkowitz | | Date of Receipt |
| Mailing Address 223 LINCOLN AVENUE | | <input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Highland Park | NJ | 08904 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.37330 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Garden Homes | Controller | <input type="text" value="350.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | Mission |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="350.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Kevin Lemmer | | Date of Receipt |
| Mailing Address 248 Chestnut Street | | <input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Englewood | NJ | 07631 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.37236 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| ADAR Investment Management | Portfolio Manager | <input type="text" value="1000.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | Earmark - Garrett |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1000.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Kevin Lemmer | | Date of Receipt |
| Mailing Address 248 Chestnut Street | | <input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Englewood | NJ | 07631 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.37465 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| ADAR Investment Management | Portfolio Manager | <input type="text" value="325.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | Mission |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1325.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1675.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 68 OF 133 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Betty Lerman
Full Name (Last, First, Middle Initial)

Mailing Address 369 Longacre Ave

City Woodmere State NY Zip Code 11598

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

Name of Employer Forest Research Inc Occupation Associate Director payable department

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37380

Amount of Each Receipt this Period
 325.00

Mission

B. Jeffrey Levin
Full Name (Last, First, Middle Initial)

Mailing Address 19 Charlotte Drive

City Wesley Hills State NY Zip Code 10977

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

Name of Employer Bryan Cave LLP Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11AI.37340

Amount of Each Receipt this Period
 400.00

Mission

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

Mailing Address 2 Chestnut Hill Rd

City Manalapan State NJ Zip Code 07726

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

Name of Employer Levin,Shea,Pfeffer & Topas, PA Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37113

Amount of Each Receipt this Period
 1000.00

Conduit - Garrett

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 725.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 69 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | | |
|---|---------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Saul Levine | | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37390 |
| Mailing Address 604 Rutland Ave. | | | Amount of Each Receipt this Period 200.00 |
| City Teaneck | State NJ | Zip Code 07666 | Mission |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Horizon Project Advisors | Occupation Construction Consultant | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | | |

| | | | |
|---|---------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Saul Levine | | | Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11AI.37194 |
| Mailing Address 604 Rutland Ave. | | | Amount of Each Receipt this Period 36.00 |
| City Teaneck | State NJ | Zip Code 07666 | Mission |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Horizon Project Advisors | Occupation Construction Consultant | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 236.00 | | |

| | | | |
|---|-------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Allen Levinson | | | Date of Receipt MM / DD / YYYY 02 / 24 / 2014 Transaction ID : SA11AI.37235 |
| Mailing Address 11 Ivy Place | | | Amount of Each Receipt this Period 2000.00 |
| City Upper Saddle River | State NJ | Zip Code 07458 | Earmark - Garrett |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Credit Risk Advisors LP | Occupation Investment Manager | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2236.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 70 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Marcia Levinson
Full Name (Last, First, Middle Initial)

Mailing Address 419 Becker Street

City Highland Park State NJ Zip Code 08904

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

Name of Employer Park Eye Center Occupation Receptionist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2014
Transaction ID : SA11AI.37265

Amount of Each Receipt this Period
 250.00

Mission

B. Alan Levow
Full Name (Last, First, Middle Initial)

Mailing Address 2891 Howell Mill Rd NW

City Atlanta State GA Zip Code 30327

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

Name of Employer Crowne Partners Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37164

Amount of Each Receipt this Period
 1000.00

Donation

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

Mailing Address 27 Prospect Rd

City Livingston State NJ Zip Code 07039

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

Name of Employer Avrtek Consulting Occupation Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11AI.37463

Amount of Each Receipt this Period
 125.00

Mission

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 71 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ari Lewitter
Full Name (Last, First, Middle Initial)

Mailing Address 150 Valentine St.

City Highland Park State NJ Zip Code 08904

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

Name of Employer Rutgers U Occupation Training Coordinator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37369

Amount of Each Receipt this Period
325.00

Mission

B. Roz Lipsky
Full Name (Last, First, Middle Initial)

Mailing Address 28 Lakeview Dr

City West Orange State NJ Zip Code 07052

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

Name of Employer Self Occupation Pharmaceutical

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37266

Amount of Each Receipt this Period
225.00

Mission

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

Mailing Address 53 Walnut Court

City Englewood State NJ Zip Code 07631

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37481

Amount of Each Receipt this Period
350.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ **900.00**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jodie Lochak
Full Name (Last, First, Middle Initial)

Mailing Address 201 Exiter Way

City Hillside State NJ Zip Code 07205

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37509

Amount of Each Receipt this Period
75.00

Mission

B. Caryn Loffman
Full Name (Last, First, Middle Initial)

Mailing Address 465 Rutland Avenue

City Teaneck State NJ Zip Code 07666

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

Name of Employer HUMC Occupation Social Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11AI.37462

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 21 Cleveland Avenue

City Highland Park State NJ Zip Code 08904

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

Name of Employer Google Occupation software engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37168

Amount of Each Receipt this Period
250.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ **525.00**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 73 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Neal Machtiger
Full Name (Last, First, Middle Initial)

Mailing Address 3 Boston Post Road

City East Brunswick State NJ Zip Code 07666

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

Name of Employer retired Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37192

Amount of Each Receipt this Period
 125.00

Mission

B. michael meiner
Full Name (Last, First, Middle Initial)

Mailing Address 484 Lincoln Ave

City Highland Park State NJ Zip Code 08904

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

Name of Employer oracle Occupation software engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37484

Amount of Each Receipt this Period
 200.00

Mission

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

Mailing Address 19 Tuxedo Dr

City Livingston State NJ Zip Code 07039

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

Name of Employer Self Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37140

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Howard Miller | | Date of Receipt MM / DD / YYYY 02 / 27 / 2014 Transaction ID : SA11AI.37262 |
| Mailing Address 158 Grand Ave. | | Amount of Each Receipt this Period 1000.00 |
| City Englewood | State NJ | Zip Code 07631 |
| FEC ID number of contributing federal political committee. C | Earmark - Landrieu | |
| Name of Employer Paine Webber | Occupation Trader | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Shulamith Miller | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37386 |
| Mailing Address 1750 e 10 st | | Amount of Each Receipt this Period 125.00 |
| City Brooklyn | State NY | Zip Code 11223 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Self | Occupation Educator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Albert Mitzner | | Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11AI.37450 |
| Mailing Address n/a | | Amount of Each Receipt this Period 125.00 |
| City n/a | State NJ | Zip Code 01234 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer n/a | Occupation n/a | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1250.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 75 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Jason Muss

Mailing Address 181 East 90th

City New York State NY Zip Code 10128

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

Name of Employer Occupation
Muss Development Corp Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
02 / 19 / 2014
Transaction ID : SA11AI.37217

Amount of Each Receipt this Period
5000.00

Donation

Full Name (Last, First, Middle Initial)
B. Toni Nayowitz

Mailing Address 493 Forest Avenue

City Teaneck State NJ Zip Code 07666

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

Name of Employer Occupation
Judaica House, Teaneck, NJ Retail

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
02 / 11 / 2014
Transaction ID : SA11AI.37316

Amount of Each Receipt this Period
225.00

Mission

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

Mailing Address 37 Milford Lane

City Suffern State NY Zip Code 10901

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
02 / 04 / 2014
Transaction ID : SA11AI.37144

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 76 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ted Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 37 Milford Lane

City Suffern State NY Zip Code 10901

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37145

Amount of Each Receipt this Period
 125.00

Mission

B. Melvin Ness
Full Name (Last, First, Middle Initial)

Mailing Address 638 Winthrop Road

City Teaneck State NJ Zip Code 07666

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

Name of Employer unavailable Occupation unavailable

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 15 / 2014
Transaction ID : SA11AI.37349

Amount of Each Receipt this Period
 300.00

Mission

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

Mailing Address 24 Thames Blvd

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Sirona Dental Systems, Inc. Occupation Computers

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2014
Transaction ID : SA11AI.37441

Amount of Each Receipt this Period
 350.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 77 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Carly Newhouse
Full Name (Last, First, Middle Initial)

Mailing Address 3750 Hudson Manor Terrace, Apt. 3B

| | | |
|---------------|-------------|-------------------|
| City Bronx | State NY | Zip Code 10463 |
|---------------|-------------|-------------------|

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

| | |
|-------------------------|-----------------------|
| Name of Employer N/A | Occupation Student |
|-------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 11 | / | 2014 |

Transaction ID : SA11AI.37315

Amount of Each Receipt this Period
200.00

Mission

B. Doris Newman
Full Name (Last, First, Middle Initial)

Mailing Address 11 Kupperman lane

| | | |
|----------------|-------------|-------------------|
| City Monsey | State NY | Zip Code 10952 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------|-----------------------|
| Name of Employer N/A | Occupation Retired |
|-------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 16 | / | 2014 |

Transaction ID : SA11AI.37365

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 35 Marshall Drive

| | | |
|----------------|-------------|-------------------|
| City Edison | State NJ | Zip Code 08817 |
|----------------|-------------|-------------------|

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

| | |
|-----------------------------|-----------------------|
| Name of Employer Retired | Occupation Retired |
|-----------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 20 | / | 2014 |

Transaction ID : SA11AI.37219

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 78 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. alan novick
Full Name (Last, First, Middle Initial)

Mailing Address 140 n 7th ave

City highland park State NJ Zip Code 08904

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

Name of Employer pressman toy Occupation it dir.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37355

Amount of Each Receipt this Period
125.00

Mission

B. azriel novogroder
Full Name (Last, First, Middle Initial)

Mailing Address 782 dearborn st

City teaneck State NJ Zip Code 07666

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

Name of Employer self Occupation physical therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2014
Transaction ID : SA11AI.37339

Amount of Each Receipt this Period
125.00

Mission

c. Nathan Orgel
Full Name (Last, First, Middle Initial)

Mailing Address 19 Brookfall Road

City Edison State NJ Zip Code 08904

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

Name of Employer n/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37325

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 79 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Julie Papier
Full Name (Last, First, Middle Initial)

Mailing Address 806 Downing St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Berger & Co PA Occupation Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37197

Amount of Each Receipt this Period
 200.00

Mission

B. Gonen Paradis
Full Name (Last, First, Middle Initial)

Mailing Address 35 Mountain Ridge Dr

City Livingston State NJ Zip Code 07631

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

Name of Employer Atlantic Realty Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11AI.37251

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

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

Mailing Address 35 Mountain Ridge Dr

City Livingston State NJ Zip Code 07039

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

Name of Employer Edison Village Association Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11AI.37253

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

SUBTOTAL of Receipts This Page (optional)..... ▶ 2200.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 80 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Drew Parker
Full Name (Last, First, Middle Initial)
Mailing Address 159 Maple St.
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Kingsbrook Investments Occupation Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2014
Transaction ID : SA11AI.37308
Amount of Each Receipt this Period
250.00
Mission

B. Glenn Pfeiffer
Full Name (Last, First, Middle Initial)
Mailing Address 33 Laurel Ct
City Bergenfield State NJ Zip Code 07621
FEC ID number of contributing federal political committee. **C**
Name of Employer GE Capital Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2014
Transaction ID : SA11AI.37439
Amount of Each Receipt this Period
125.00
Mission

C. David Plotzker
Full Name (Last, First, Middle Initial)
Mailing Address 1273 Dickerson rd.
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Medco Health Solutions, Inc. Occupation I.T. Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2014
Transaction ID : SA11AI.37409
Amount of Each Receipt this Period
275.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 81 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. brent powers | | Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11AI.37177 |
| Mailing Address 2714 netherland ave | | Amount of Each Receipt this Period 125.00 |
| City bronx | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer columbia university | Occupation IT mngr | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. larry prince | | Date of Receipt MM / DD / YYYY 02 / 18 / 2014 Transaction ID : SA11AI.37206 |
| Mailing Address 32 greenwood ave | | Amount of Each Receipt this Period 125.00 |
| City west orange | State NJ | Zip Code 07052 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer n/a | Occupation sales mngmt | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Craig Prupis | | Date of Receipt MM / DD / YYYY 02 / 11 / 2014 Transaction ID : SA11AI.37309 |
| Mailing Address 30 Edgemount Road | | Amount of Each Receipt this Period 179.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer BNY Mellon | Occupation computer programmer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 179.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 429.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 82 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NORPAC

A. Craig Prupis
Full Name (Last, First, Middle Initial)
Mailing Address 30 Edgemount Road
City Edison State NJ Zip Code 08817
FEC ID number of contributing federal political committee. **C**
Name of Employer BNY Mellon Occupation computer programmer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 254.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11AI.37310
Amount of Each Receipt this Period 75.00
Mission

B. Isaac Putterman
Full Name (Last, First, Middle Initial)
Mailing Address 4421 Douglas Avenue
City Riverdale State NY Zip Code 10471
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Business
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 18 / 2014
Transaction ID : SA11AI.37413
Amount of Each Receipt this Period 500.00
Earmark - Coons

C. Steven Rand
Full Name (Last, First, Middle Initial)
Mailing Address 2 Trinity Court
City Bergenfield State NJ Zip Code 07621
FEC ID number of contributing federal political committee. **C**
Name of Employer Barclays Capital Occupation Compliance Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 16 / 2014
Transaction ID : SA11AI.37364
Amount of Each Receipt this Period 200.00
Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 775.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 83 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. joseph rapaport

Mailing Address 2 Stanford Ct

City West Orange State NJ Zip Code 07052

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.37151

Amount of Each Receipt this Period
200.00

Mission

Full Name (Last, First, Middle Initial)
B. Josh Rapps

Mailing Address 11 Edgemount Road

City Edison State NJ Zip Code 08817

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

Name of Employer Bloomberg Occupation Software Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11AI.37471

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 777 Dearborn St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Dresner Kleinwort &Wasserstein Occupation Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37452

Amount of Each Receipt this Period
275.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 84 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Mr. Simon Raykher
Full Name (Last, First, Middle Initial)

Mailing Address 777 Dearborn St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Satellite Asset Management Occupation Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37294

Amount of Each Receipt this Period
200.00

Mission

B. Mel Reichman
Full Name (Last, First, Middle Initial)

Mailing Address 1184 Trafalgar Street

City Teaneck State NJ Zip Code 07666

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

Name of Employer Liz Claiborne Inc Occupation IT Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37494

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 21 Sandy Hollow Drive

City Smithtown State NY Zip Code 11787

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

Name of Employer Energy Times Occupation Editor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37204

Amount of Each Receipt this Period
200.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 525.00 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 85 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Howard Rifkind | | Date of Receipt MM / DD / YYYY 02 / 16 / 2014 Transaction ID : SA11AI.37359 |
| Mailing Address 3 Calumet Ave. | | Amount of Each Receipt this Period 125.00 |
| City Rockaway | State NJ | Zip Code 07866 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer retired | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Israel Rivkin | | Date of Receipt MM / DD / YYYY 02 / 12 / 2014 Transaction ID : SA11AI.37180 |
| Mailing Address 1 Opatut Ct. | | Amount of Each Receipt this Period 125.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer n/a | Occupation n/a | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 125.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Sofia Rivkind | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37382 |
| Mailing Address 3840 greystone ave | | Amount of Each Receipt this Period 250.00 |
| City Bronx | State NY | Zip Code 10463 |
| FEC ID number of contributing federal political committee. C | Mission | |
| Name of Employer Oracle | Occupation Software Architect | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 86 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. mark rosalimsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 1217 trafaigr st
 City teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bank of America Occupation Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37455
 Amount of Each Receipt this Period
 200.00
 Mission

B. Judah Rosenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address 473 Maitland Ave
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KOF-K kosher supervision Occupation Rabbi kosher food
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37454
 Amount of Each Receipt this Period
 125.00
 Mission

C. Susan Rosenbluth
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 Dana Pl
 City Englewood State NJ Zip Code 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jewish Voice and Opinion Occupation Reporter
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37170
 Amount of Each Receipt this Period
 150.00
 Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 475.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 87 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Deborah Rosenzweig
 Full Name (Last, First, Middle Initial)
 Mailing Address po box 156
 City State Zip Code
 Lawrence NY 11559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Homemaker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37240
 Amount of Each Receipt this Period
 275.00
 Mission

B. Michael Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Central Park West
 City State Zip Code
 New York NY 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self finance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2014
Transaction ID : SA11AI.37129
 Amount of Each Receipt this Period
 100.00
 Conduit - Landrieu
[MEMO ITEM]

C. Alan Rubin
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 E Sherbrooke Parkway
 City State Zip Code
 Livingston NJ 07039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Prudential Systems Architect
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37398
 Amount of Each Receipt this Period
 200.00
 Mission

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 475.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 88 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
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| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Steve Salit
Full Name (Last, First, Middle Initial)

Mailing Address 402 VALENTINE ST

City Highland Park State NJ Zip Code 08904

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

Name of Employer Self Occupation Car dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37203

Amount of Each Receipt this Period
 250.00

Mission

B. Melvin Saltzman
Full Name (Last, First, Middle Initial)

Mailing Address 908 Sheffield Road

City Teaneck State NJ Zip Code 07666

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

Name of Employer BAE SYSTEMS Occupation Software Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11AI.37422

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 245 Congers Rd

City New City State NY Zip Code 10956

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

Name of Employer Mel S. Harris & Associates, LL Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37229

Amount of Each Receipt this Period
 500.00

Earmark - Garrett

SUBTOTAL of Receipts This Page (optional)..... ▶ 875.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 89 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Karl Schapiro | | Date of Receipt MM / DD / YYYY 02 / 25 / 2014 Transaction ID : SA11AI.37238 |
| Mailing Address 147 306 78th Ave | | Amount of Each Receipt this Period 200.00 |
| City Flushing | State NY | Zip Code 11367 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Queens College | Occupation Student | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Harvey Schatz | | Date of Receipt MM / DD / YYYY 02 / 17 / 2014 Transaction ID : SA11AI.37407 |
| Mailing Address 60 Canterbury Ct. | | Amount of Each Receipt this Period 275.00 |
| City Teaneck | State NJ | Zip Code 07666 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer Best Efforts Used to Obtain | Occupation Best Efforts Used to Obtain | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Gary Schechter | | Date of Receipt MM / DD / YYYY 02 / 15 / 2014 Transaction ID : SA11AI.37348 |
| Mailing Address 12 MARSHALL DRIVE | | Amount of Each Receipt this Period 200.00 |
| City Edison | State NJ | Zip Code 08817 |
| FEC ID number of contributing federal political committee. C | | Mission |
| Name of Employer MorganStanley | Occupation Computer Programmer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 675.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 90 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Marvin Schechter

Mailing Address 518 Ogden Ave.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37372

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Jeff Schein

Mailing Address 334 North Eighth Ave.

City State Zip Code
Edison NJ 08817

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

Name of Employer Occupation
Johnson and Johnson Epidemiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
161.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2014
Transaction ID : SA11AI.37156

Amount of Each Receipt this Period
36.00

Mission

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

Mailing Address 3333 Henry Hudson Pkwy

City State Zip Code
Bronx NY 10463

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

Name of Employer Occupation
retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37207

Amount of Each Receipt this Period
75.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 236.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 91 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. harold schertz
Full Name (Last, First, Middle Initial)

Mailing Address 88 margaret ave

City lawrnece State NY Zip Code 11559

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

Name of Employer sri, llc Occupation real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11AI.37417

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 153 Fort Lee Road

City Teaneck State NJ Zip Code 07666

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

Name of Employer Key Properties Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014

Transaction ID : SA11AI.37321

Amount of Each Receipt this Period
125.00

Mission

C. Mr Josef Schranz
Full Name (Last, First, Middle Initial)

Mailing Address 3 Buena Vista Road

City Suffern State NY Zip Code 10901

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

Name of Employer NORPAC Occupation Membership Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11AI.37389

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 92 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jeffrey Schreiber
Full Name (Last, First, Middle Initial)

Mailing Address 208 Lincoln Ave.

City Highland Park State NJ Zip Code 08904

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

Name of Employer Self (Meister Seelig & Fein) Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11AI.37421

Amount of Each Receipt this Period 125.00

Mission

B. steven Schreiber
Full Name (Last, First, Middle Initial)

Mailing Address 637 thames blvd

City teaneclj State NJ Zip Code 07666

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

Name of Employer pacific data vision Occupation exec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 15 / 2014
Transaction ID : SA11AI.37345

Amount of Each Receipt this Period 300.00

Mission

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

Mailing Address 393 Gloucester Street

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Public Relations Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.37501

Amount of Each Receipt this Period 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 93 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Elana Schwartz
Full Name (Last, First, Middle Initial)

Mailing Address 16 Chestney Road

City Lawrence State NY Zip Code 11559

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11AI.37510

Amount of Each Receipt this Period 200.00

Mission

B. Abe Schwartzbard
Full Name (Last, First, Middle Initial)

Mailing Address 9 Fairhill Road

City Edison State NJ Zip Code 08817

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

Name of Employer Hewlett Packard Financial Serv Occupation Sales Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 10 / 2014
Transaction ID : SA11AI.37288

Amount of Each Receipt this Period 225.00

Mission

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

Mailing Address 733 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37391

Amount of Each Receipt this Period 925.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 94 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
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| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Lawrence Shafier

Mailing Address 100 cherry lane

City Teaneck State NJ Zip Code 07666

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

Name of Employer Prudential Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11AI.37280

Amount of Each Receipt this Period
200.00

Mission

Full Name (Last, First, Middle Initial)
B. Maksim Shapiro

Mailing Address 3333 Henry Hudson Parkway, Apt 20E

City Riverdale State NY Zip Code 10463

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

Name of Employer NYU Langone Medical Center Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
143.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37370

Amount of Each Receipt this Period
143.00

Mission

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

Mailing Address 717 Ocean Ave. -- Apt. 907

City Long Branch State NJ Zip Code 07740

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

Name of Employer TE SubCom Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 20 / 2014
Transaction ID : SA11AI.37428

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 468.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 95 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
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| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. raphael sharret
Full Name (Last, First, Middle Initial)

Mailing Address na

City na State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2014
Transaction ID : SA11AI.37291

Amount of Each Receipt this Period
 125.00

Mission

B. Douglas Shelling
Full Name (Last, First, Middle Initial)

Mailing Address 790 Dearborn St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Bingham McCutchen Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11AI.37227

Amount of Each Receipt this Period
 275.00

Mission

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

Mailing Address 411 Highview Road

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Investment Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37480

Amount of Each Receipt this Period
 200.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 600.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 96 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Seth Siegel
Full Name (Last, First, Middle Initial)

Mailing Address 300 Central Park West
Apt 7-A

City New York State NY Zip Code 10024

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

Name of Employer Beanstalk Group Occupation Vice Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
02 / 25 / 2014
Transaction ID : SA11AI.37230

Amount of Each Receipt this Period
2500.00

Donation

B. Joseph Silverman
Full Name (Last, First, Middle Initial)

Mailing Address 1126 Alessandrini Ave.

City New Milford State NJ Zip Code 07646

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

Name of Employer Self Occupation Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
02 / 28 / 2014
Transaction ID : SA11AI.37506

Amount of Each Receipt this Period
200.00

Mission

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

Mailing Address 240 E Palisade Ave Apt C9

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Inv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
02 / 07 / 2014
Transaction ID : SA11AI.37153

Amount of Each Receipt this Period
50.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 97 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Douglas Skolnick
Full Name (Last, First, Middle Initial)

Mailing Address 828 Stonewall Ct

City Franklin Lakes State NJ Zip Code 07417

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37115

Amount of Each Receipt this Period
 1000.00

Conduit - Garrett

[MEMO ITEM]

B. Ira Smith
Full Name (Last, First, Middle Initial)

Mailing Address 407 N. Eighth Ave.

City Edison State NJ Zip Code 08817

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

Name of Employer Verizon Wireless Occupation Technical assistance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37403

Amount of Each Receipt this Period
 125.00

Mission

c. Ira Smith
Full Name (Last, First, Middle Initial)

Mailing Address 407 N. Eighth Ave.

City Edison State NJ Zip Code 08817

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

Name of Employer Verizon Wireless Occupation Technical assistance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37404

Amount of Each Receipt this Period
 75.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 98 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Ira Smith
Full Name (Last, First, Middle Initial)
Mailing Address 407 N. Eighth Ave.
City Edison State NJ Zip Code 08817
FEC ID number of contributing federal political committee. **C**
Name of Employer Verizon Wireless Occupation Technical assistance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37405
Amount of Each Receipt this Period 125.00
Mission

B. Ira Smith
Full Name (Last, First, Middle Initial)
Mailing Address 407 N. Eighth Ave.
City Edison State NJ Zip Code 08817
FEC ID number of contributing federal political committee. **C**
Name of Employer Verizon Wireless Occupation Technical assistance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 17 / 2014
Transaction ID : SA11AI.37406
Amount of Each Receipt this Period 75.00
Mission

C. Daniel Sragow
Full Name (Last, First, Middle Initial)
Mailing Address 6 Darby Road
City East Brunswick State NJ Zip Code 08816
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11AI.37445
Amount of Each Receipt this Period 250.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 99 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Karen Stahl Don
Full Name (Last, First, Middle Initial)
Mailing Address 2600 Netherland Ave. Apt.815
City Bronx State NY Zip Code 10463
FEC ID number of contributing federal political committee. **C**
Name of Employer LLM candidate at Cardozo Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 75.00

Date of Receipt 02 / 28 / 2014
Transaction ID : SA11AI.37488
Amount of Each Receipt this Period 75.00
Mission

B. Kalman Staiman
Full Name (Last, First, Middle Initial)
Mailing Address 103 Edgemont Pl
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Goldman Sachs Occupation Computer Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 16 / 2014
Transaction ID : SA11AI.37357
Amount of Each Receipt this Period 125.00
Mission

c. Shalom Stavsky
Full Name (Last, First, Middle Initial)
Mailing Address 2 Riverside Drive, Apt. 3B
City New York State NY Zip Code 10023
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Semi-Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 125.00

Date of Receipt 02 / 11 / 2014
Transaction ID : SA11AI.37305
Amount of Each Receipt this Period 125.00
Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 100 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Henry Stein
Full Name (Last, First, Middle Initial)

Mailing Address 580 Ashwood Road

City Springfield State NJ Zip Code 07081

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

Name of Employer Atlantic Realty Development Occupation Real Estate Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2014
Transaction ID : SA11AI.37248

Amount of Each Receipt this Period
 1000.00

Earmark - Landrieu

B. Martin Stein
Full Name (Last, First, Middle Initial)

Mailing Address 507 Maitland Ave.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Parker Duryee Rosoff & Haft Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37356

Amount of Each Receipt this Period
 250.00

Mission

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

Mailing Address 700 Park Ave

City Elizabeth State NJ Zip Code 07208

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

Name of Employer Yeshiva Katana of Passaic Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11AI.37433

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 1375.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 101 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Roberta Stein
Full Name (Last, First, Middle Initial)

Mailing Address 700 Park Ave

City Elizabeth State NJ Zip Code 07208

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

Name of Employer Yeshiva Katana of Passaic Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2014
Transaction ID : SA11AI.37458

Amount of Each Receipt this Period
125.00

Mission

B. stephen Stein
Full Name (Last, First, Middle Initial)

Mailing Address 319 Lawrence ave

City highland park State NJ Zip Code 08904

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

Name of Employer telcordia Occupation exec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2014
Transaction ID : SA11AI.37464

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 403 N 8th Ave

City Edison State NJ Zip Code 08817

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

Name of Employer V-Comm Occupation Electrical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2014
Transaction ID : SA11AI.37474

Amount of Each Receipt this Period
200.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER: PAGE 102 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Jules Stern

Mailing Address 17 Vincent Rd

City Spring Valley State NY Zip Code 10977

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

Name of Employer Self Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37121

Amount of Each Receipt this Period
 250.00

Conduit - Garrett

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Trudy Stern

Mailing Address 480 ocean ave

City Lawrence State NY Zip Code 11559

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37334

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 480 ocean ave

City Lawrence State NY Zip Code 11559

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37335

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 103 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Trudy Stern | | Date of Receipt |
| Mailing Address 480 ocean ave | | <input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Lawrence | NY | 11559 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self | Attorney | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="375.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="125.00"/> |
| | | Mission |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Becky Sternglass | | Date of Receipt |
| Mailing Address 11 1/2 Cedar Ave. | | <input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Elizabeth | NJ | 07202 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self | Homemaker | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="75.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="75.00"/> |
| | | Mission |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Miriam Stiefel | | Date of Receipt |
| Mailing Address 280 Starling Rd. | | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Englewood | NJ | 07631 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Hudson Energy Services | Office Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="125.00"/> | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="125.00"/> |
| | | Mission |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="325.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

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

FOR LINE NUMBER: PAGE 104 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Justin Straus

Mailing Address 122 Golf Court

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Oradell Animal Hospital Veterinarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2014
Transaction ID : SA11AI.37367

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Mark Teicher

Mailing Address 1317 Hudson St.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Physician Cardiology Ctr of N. Jersey

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2014
Transaction ID : SA11AI.37241

Amount of Each Receipt this Period
125.00

Mission

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

Mailing Address 99 Lexington Ave

City State Zip Code
Edison NJ 08817

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

Name of Employer Occupation
Bristol Meyers Squibb Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2014
Transaction ID : SA11AI.37270

Amount of Each Receipt this Period
125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 105 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Esther Toporovsky
Full Name (Last, First, Middle Initial)

Mailing Address 200 Cherry Ln

City Teaneck State NJ Zip Code 07666

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

Name of Employer Arthur Court Realty Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **75.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SA11AI.37260

Amount of Each Receipt this Period
75.00

Mission

B. Leslie Tugetman
Full Name (Last, First, Middle Initial)

Mailing Address 612 West 232 Street

City Riverdale State NY Zip Code 10463

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

Name of Employer Self Occupation Interior Design

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : SA11AI.37142

Amount of Each Receipt this Period
250.00

Mission

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

Mailing Address 35 Edgemount Rd

City Edison State NJ Zip Code 08817

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

Name of Employer FEGS Occupation NGO Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2014

Transaction ID : SA11AI.37243

Amount of Each Receipt this Period
200.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ **525.00**

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 106 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. steven weil
 Full Name (Last, First, Middle Initial)
 Mailing Address 1678 Hanover St
 City Teaneck State NJ Zip Code 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Exec VP Occupation OU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37307
 Amount of Each Receipt this Period
 125.00
 Mission

B. Leo Weinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Hilltop Place
 City Monsey State NY Zip Code 10952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Konigsberg, Wolf & Co. Occupation Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37388
 Amount of Each Receipt this Period
 125.00
 Mission

C. Bruce Weinrib
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Downing St.
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ernst & Young Occupation Accountant/Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2014
Transaction ID : SA11AI.37214
 Amount of Each Receipt this Period
 325.00
 Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 575.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 107 OF 133 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. William Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 371 Cumberland Street

| | | |
|-------------------|-------------|-------------------|
| City Englewood | State NJ | Zip Code 07631 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer paperclip software | Occupation Executive |
|--|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 06 | / | 2014 |

Transaction ID : SA11AI.37275

Amount of Each Receipt this Period
125.00

Mission

B. William Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 371 Cumberland Street

| | | |
|-------------------|-------------|-------------------|
| City Englewood | State NJ | Zip Code 07631 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer paperclip software | Occupation Executive |
|--|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 06 | / | 2014 |

Transaction ID : SA11AI.37276

Amount of Each Receipt this Period
75.00

Mission

C. William Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 371 Cumberland Street

| | | |
|-------------------|-------------|-------------------|
| City Englewood | State NJ | Zip Code 07631 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer paperclip software | Occupation Executive |
|--|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | / | 16 | / | 2014 |

Transaction ID : SA11AI.37191

Amount of Each Receipt this Period
250.00

Donation

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 108 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. William Weiss
Full Name (Last, First, Middle Initial)

Mailing Address 371 Cumberland Street

City Englewood State NJ Zip Code 07631

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

Name of Employer paperclip software Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37185

Amount of Each Receipt this Period
 2000.00

Earmark - Landrieu

B. Rephael Wenger
Full Name (Last, First, Middle Initial)

Mailing Address 2490 Floribunda Drive

City Columbus State OH Zip Code 43209

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

Name of Employer The Ohio State U Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2014
Transaction ID : SA11AI.37435

Amount of Each Receipt this Period
 125.00

Mission

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

Mailing Address 668 North Forest Drive

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37497

Amount of Each Receipt this Period
 1125.00

Mission

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3250.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 109 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Susan Wiesen
 Full Name (Last, First, Middle Initial)
 Mailing Address 668 North Forest Drive
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Legal services Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **125.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37499
 Amount of Each Receipt this Period
125.00
 Mission

B. Robert Wind
 Full Name (Last, First, Middle Initial)
 Mailing Address 276 Warwick Ave.
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Dentist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37165
 Amount of Each Receipt this Period
275.00
 Mission

C. tema winston
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Tall Oaks Dr
 City East brunswick State NJ Zip Code 08816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014
Transaction ID : SA11AI.37302
 Amount of Each Receipt this Period
250.00
 Mission

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 650.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 110 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. David Wisotsky
Full Name (Last, First, Middle Initial)

Mailing Address 161 Huguenot Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Tenafly Pediatrics Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2014
Transaction ID : SA11AI.37138

Amount of Each Receipt this Period
 250.00

Mission

B. Barry Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 128 N. 8th Ave

City Highland Park State NJ Zip Code 08904

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

Name of Employer self Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2014
Transaction ID : SA11AI.37285

Amount of Each Receipt this Period
 225.00

Mission

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

Mailing Address 376 Central Ave, Apt 4B

City Lawrence State NY Zip Code 11559

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

Name of Employer N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2014
Transaction ID : SA11AI.37337

Amount of Each Receipt this Period
 125.00

Mission

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 111 OF 133 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. David Yastrab

Mailing Address 244 Steven Place

City Woodmere State NY Zip Code 11598

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

Name of Employer Self Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37384

Amount of Each Receipt this Period
125.00

Mission

Full Name (Last, First, Middle Initial)
B. Esther Zeidman

Mailing Address 92 margaret avenue

City Lawrence State NY Zip Code 11559

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

Name of Employer self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2014
Transaction ID : SA11AI.37179

Amount of Each Receipt this Period
325.00

Mission

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

Mailing Address 21 price dr

City edison State NJ Zip Code 08817

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

Name of Employer tullett prebon Occupation computers

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA11AI.37478

Amount of Each Receipt this Period
125.00

Mission

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 575.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 112 OF 133 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NORPAC

A. Stanley Zimmerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 316 North 8th Ave
 City Edison State NJ Zip Code 08817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014
Transaction ID : SA11AI.37397
 Amount of Each Receipt this Period
 125.00
 Mission

B. Bernard Zweig
 Full Name (Last, First, Middle Initial)
 Mailing Address 393 West End Ave.
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self (Zweig Financial) Occupation Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2014
Transaction ID : SA11AI.37200
 Amount of Each Receipt this Period
 325.00
 Mission

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 450.00 |
| TOTAL This Period (last page this line number only).....▶ | 106063.00 |

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

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

FOR LINE NUMBER: PAGE 113 OF 133
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Valley National Bank
 Mailing Address 1445 Valley Rd
 City State Zip Code
 Wayne NJ 07470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 41.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2014
Transaction ID : SA17.37523
 Amount of Each Receipt this Period
 19.63
 interest income

Full Name (Last, First, Middle Initial)
B.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)
C.
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 19.63
TOTAL This Period (last page this line number only)..... ▶ 19.63

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Commissioner of Finance - County of Rockland

Mailing Address 18 New Hempstead Rd

City New City State NY Zip Code 10956

Purpose of Disbursement
Josef Schranz COBRA Health Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : **SB21B.37095**

Amount of Each Disbursement this Period

786.97

Category/
Type

Full Name (Last, First, Middle Initial)

B. D.L. Simmons Security Agency

Mailing Address 7716 Rotherham Dr.

City Hanover State MD Zip Code 21076

Purpose of Disbursement
security officer (mission)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : **SB21B.37076**

Amount of Each Disbursement this Period

135.68

Category/
Type

Full Name (Last, First, Middle Initial)

C. Elavon

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Elavon merchant service fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : **SB21B.37526**

Amount of Each Disbursement this Period

332.87

Category/
Type

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

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

1255.52

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Geico

Mailing Address 1 Geico Plaza

City State Zip Code
Bethesda MD 20810

Purpose of Disbursement
Josef Schranz Car Insurance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.37091

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. HCC Specialty

Mailing Address 401 Edgewater Place
Suite 400

City State Zip Code
Wakefield MA 01880

Purpose of Disbursement
Insurance for Convention Center

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.37088

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address N/A

City State Zip Code
Ogden UT 84201

Purpose of Disbursement
IRS Tax Payment Yr 2013

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.37125

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Jewish Connection

Mailing Address 959 Forest Hill Rd

City Staten Island State NY Zip Code 10314

Purpose of Disbursement
mission advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.37080

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jewish Voice

Mailing Address 73 Dana Place

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
mission ad (2014)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

004
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2014

Transaction ID : SB21B.37075

Amount of Each Disbursement this Period

140.00

Full Name (Last, First, Middle Initial)

C. Liberty Mutual Group

Mailing Address PO Box 8400

City Dover State NH Zip Code 03821

Purpose of Disbursement
Mindy Berman Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.37079

Amount of Each Disbursement this Period

300.00

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

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

690.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Long Island Jewish World

Mailing Address 1525 Central Ave

City Far Rockaway State NY Zip Code 11691

Purpose of Disbursement
mission ad

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2014

Transaction ID : SB21B.37096

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Medical Faculty Associates, Inc.

Mailing Address 2120 L Street NW, Suite 530

City Washington State DC Zip Code 20037

Purpose of Disbursement
Medical Staff/Nurse for Mission

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB21B.37077

Amount of Each Disbursement this Period

365.00

Full Name (Last, First, Middle Initial)

C. NJ Jewish News

Mailing Address 901 Route 10

City Whippany State NJ Zip Code 07981

Purpose of Disbursement
mission ad

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2014

Transaction ID : SB21B.37086

Amount of Each Disbursement this Period

326.00

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

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

941.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Leonor Nunez

Mailing Address 526 Longview Ave

City State Zip Code
Cliffside Park NJ 07010

Purpose of Disbursement
payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 10 / 2014

Transaction ID : SB21B.37085

Amount of Each Disbursement this Period

107.93

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City State Zip Code
Piscataway NJ 08854

Purpose of Disbursement
invoice

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 10 / 2014

Transaction ID : SB21B.37081

Amount of Each Disbursement this Period

320.00

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City State Zip Code
Piscataway NJ 08854

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
02 / 10 / 2014

Transaction ID : SB21B.37082

Amount of Each Disbursement this Period

504.92

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

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

932.85

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City State Zip Code
Piscataway NJ 08854

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2014

Transaction ID : SB21B.37124

Amount of Each Disbursement this Period

690.23

Full Name (Last, First, Middle Initial)

B. paypal

Mailing Address PO Box 45950

City State Zip Code
Omaha NE 68145

Purpose of Disbursement
fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21B.37522

Amount of Each Disbursement this Period

1153.37

Full Name (Last, First, Middle Initial)

C. Queens Jewish Link

Mailing Address 147-25 70th Avenue

City State Zip Code
Flushing NY 11367

Purpose of Disbursement
mission ad

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.37087

Amount of Each Disbursement this Period

800.00

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

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

2643.60

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|---|-------------------|--|
| Full Name (Last, First, Middle Initial) A. Mr Josef Schranz | | Date of Disbursement MM / DD / YYYY 02 / 10 / 2014 |
| Mailing Address 3 Buena Vista Road | | Transaction ID : SB21B.37083 |
| City Suffern | State NY | |
| Purpose of Disbursement payroll | Candidate Name | Amount of Each Disbursement this Period 1339.37 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | Category/ Type | |

| | | |
|---|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr Josef Schranz | | Date of Disbursement MM / DD / YYYY 02 / 10 / 2014 |
| Mailing Address 3 Buena Vista Road | | Transaction ID : SB21B.37084 |
| City Suffern | State NY | |
| Purpose of Disbursement payroll | Candidate Name | Amount of Each Disbursement this Period 1351.67 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | Category/ Type | |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) C. Square, Inc | | Date of Disbursement MM / DD / YYYY 02 / 01 / 2014 |
| Mailing Address 110 5th Street | | Transaction ID : SB21B.37525 |
| City San Francisco | State CA | |
| Purpose of Disbursement fee | Candidate Name | Amount of Each Disbursement this Period 866.61 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | Category/ Type 001 | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 3557.65 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Square, Inc

Mailing Address 110 5th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2014

Transaction ID : SB21B.37524

Amount of Each Disbursement this Period

1123.18

Full Name (Last, First, Middle Initial)

B. Talkline Communications

Mailing Address p. o. box 1234

City new york State NY Zip Code 10023

Purpose of Disbursement
radio for mission

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2014

Transaction ID : SB21B.37094

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. The Advocate Newspaper

Mailing Address 22 Main Street

City Monsey State NY Zip Code 10952

Purpose of Disbursement
mission advertising

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2014

Transaction ID : SB21B.37074

Amount of Each Disbursement this Period

145.00

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

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

3268.18

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. The Advocate Newspaper

Mailing Address 22 Main Street

City Monsey State NY Zip Code 10952

Purpose of Disbursement
mission advertising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.37133

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
Credit Card

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.37097

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
cell phone

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.37132

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. CARR FOR CONGRESS

Mailing Address 525 E SEASIDE WAY #101-C

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement
Earmarked Donation

011

Candidate Name

CARR FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 33

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB23.37134

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. CHRIS COONS FOR DELAWARE

Mailing Address PO BOX 9900

City NEWARK State DE Zip Code 19714

Purpose of Disbursement
Earmarked Donation

Category/
Type

Candidate Name

CHRIS COONS FOR DELAWARE

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: DE District: 00

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

Transaction ID : SB23.37137

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT EVERETT STERN TO CONGRESS

Mailing Address 600 WEST GERMANTOWN PIKE SUITE 400

City PLYMOUTH MEETING State PA Zip Code 19462

Purpose of Disbursement
Earmarked Donation

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2014

Transaction ID : SB23.37092

Amount of Each Disbursement this Period

500.00

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

3000.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.37134

Contributors to Elan Carr: LandesJoshua\$2,000.00

Form/Schedule: SB23

Transaction ID: SB23.37137

Earmarked Contributions to Coons: Putterman Isaac \$500

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.37092

Contributors to Everett Stern: Landes Joshua \$500

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARY LANDRIEU INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Mailing Address 650 POYDRAS ST
SUITE 1434

Transaction ID : SB23.37126

City NEW ORLEANS State LA Zip Code 70130

Amount of Each Disbursement this Period

| |
|----------|
| 24000.00 |
|----------|

Purpose of Disbursement
Earmarked Donations

| |
|-------------------|
| 011 |
| Category/ Type |

Candidate Name

MARY L LANDRIEU

Office Sought: House
 Senate
 President
State: LA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MARY LANDRIEU INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Mailing Address 650 POYDRAS ST
SUITE 1434

Transaction ID : SB23.37130

City NEW ORLEANS State LA Zip Code 70130

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Purpose of Disbursement
Michael Ross Conduit Contribution - Landrieu

| |
|-------------------|
| |
| Category/ Type |

Candidate Name

GARRETT FOR CONGRESS

Office Sought: House
 Senate
 President
State: NJ District: 05

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MARY LANDRIEU INC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 27 | | 2014 |

Mailing Address 650 POYDRAS ST
SUITE 1434

Transaction ID : SB23.37131

City NEW ORLEANS State LA Zip Code 70130

Amount of Each Disbursement this Period

| |
|--------|
| 129.15 |
|--------|

Purpose of Disbursement
PAC Donation

| |
|-------------------|
| 011 |
| Category/ Type |

Candidate Name

MARY L LANDRIEU

Office Sought: House
 Senate
 President
State: LA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

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

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

| |
|----------|
| 24129.15 |
|----------|

| |
|--|
| |
|--|

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.37126

GontownikJerry\$1,000.00 GueronDan\$1,000.00 HalpernDavid\$2,000.00 HalpernJack\$5,000.00 HalpernJeremy
\$2,000.00 HalpernMurray\$1,000.00 JonasHoward\$5,000.00 LandesJoshua\$1,000.00 MillerHoward\$1,000.00 Paradis
Gonen\$1,000.00 ParadisJosef\$1,000.00 SteinHenry\$1,000.00 WeissWilliam\$2,000.00

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 14 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37090 |
| City SUSSEX | State NJ | |
| Zip Code 07461 | Purpose of Disbursement Earmarked Donation | Amount of Each Disbursement this Period 1000.00 |
| Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | |
| State: NJ District: 05 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37098 |
| City SUSSEX | State NJ | |
| Zip Code 07461 | Purpose of Disbursement Earmarked Donation | Amount of Each Disbursement this Period 4400.00 |
| Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | |
| State: NJ District: 05 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37100 |
| City SUSSEX | State NJ | |
| Zip Code 07461 | Purpose of Disbursement Sarit Catz Conduit Contribution - Garrett | Amount of Each Disbursement this Period 1000.00 |
| Candidate Name GARRETT FOR CONGRESS | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] |
| State: NJ District: 05 | | |

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

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

| |
|---------|
| 5400.00 |
| |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.37090

Contributors to Scott Garrett: Grossman Robert \$1000

Form/Schedule: SB23

Transaction ID: SB23.37098

Contributors to Scott Garrett: FishmanLloyd\$250.00 GoldRon\$500.00 GrossReuben\$150.00 LemmerKevin\$1,000.00
LevinsonAllen\$2,000.00 SandersArt\$500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City State Zip Code
SUSSEX NJ 07461

Purpose of Disbursement
Philip Darivoff Conduit Contribution - Garrett

Candidate Name
GARRETT FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 25 | | 2014 |

Transaction ID : SB23.37104

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City State Zip Code
SUSSEX NJ 07461

Purpose of Disbursement
Samuel Jacob Conduit Contribution - Garrett

Candidate Name
GARRETT FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 25 | | 2014 |

Transaction ID : SB23.37110

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GARRETT FOR CONGRESS

Mailing Address 100 POND SCHOOL ROAD

City State Zip Code
SUSSEX NJ 07461

Purpose of Disbursement
Richard Kroll Conduit Contribution - Garrett

Candidate Name
GARRETT FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: NJ District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02 | | 25 | | 2014 |

Transaction ID : SB23.37112

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

[MEMO ITEM]

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

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

| |
|------|
| 0.00 |
|------|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37114 |
| City SUSSEX | State NJ | |
| Purpose of Disbursement Michael Levin Conduit Contribution - Garrett | | Amount of Each Disbursement this Period 1000.00 |
| Candidate Name GARRETT FOR CONGRESS | | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NJ | District: 05 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37120 |
| City SUSSEX | State NJ | |
| Purpose of Disbursement Douglas Skolnick Conduit Contribution - Garrett | | Amount of Each Disbursement this Period 1000.00 |
| Candidate Name GARRETT FOR CONGRESS | | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NJ | District: 05 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. GARRETT FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 100 POND SCHOOL ROAD | | Transaction ID : SB23.37123 |
| City SUSSEX | State NJ | |
| Purpose of Disbursement Jules Stern Conduit Contribution - Garrett | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name GARRETT FOR CONGRESS | | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NJ | District: 05 | |

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

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

| |
|------|
| 0.00 |
| |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address PO BOX 50084

City State Zip Code
FORT WORTH TX 76105

Purpose of Disbursement
Mort Fridman Conduit Contribution - Veasey

Candidate Name
MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: TX District: 33

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 02 | | 13 | | 2014 |

Transaction ID : SB23.37515

Amount of Each Disbursement this Period

| |
|--------|
| 600.00 |
|--------|

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

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

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

| |
|------|
| 0.00 |
|------|

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|----------|
| 32529.15 |
|----------|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Cliffside Park medical

Mailing Address 663 Palisade Ave

City State Zip Code
Cliffside Park NJ 07010

Purpose of Disbursement
rent/utilities for norpac office in 2013

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 07 / 2014

Transaction ID : SB29.37078

Amount of Each Disbursement this Period
600.00

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶ 600.00