

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

New Jersey Democratic State Committee

ADDRESS (number and street)

196 West State Street

☐Check if different  
than previously  
reported. (ACC)

Trenton

NJ

08608

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00104471

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  
Quarterly 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

1 1

0 2

2 0 1 0

in the  
State of

NJ

(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the  
State of☐

5. Covering Period

1 0

0 1

2 0 1 0

through

1 0

1 3

2 0 1 0

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

Ruben J Ramos, Jr

Signature of Treasurer

Electronically Filed by Ruben J Ramos, Jr

Date

1 0

2 1

2 0 1 0

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 28

Write or Type Committee Name  
New Jersey Democratic State Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	68496.65
(b) Cash on Hand at Beginning of Reporting Period .....	30849.62	
(c) Total Receipts (from Line 19) .....	182227.48	930677.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	213077.10	999174.48
7. Total Disbursements (from Line 31) .....	137687.57	923784.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	75389.53	75389.53
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

New Jersey Democratic State Committee

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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) .....	1800.00	94765.00
(ii) Unitemized .....	700.00	14050.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2500.00	108815.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	51800.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2500.00	160615.00
12. Transfers From Affiliated/Other Party Committees .....	164230.00	407736.78
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	152.86
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	64375.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	15497.48	297798.19
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	15497.48	297798.19
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	182227.48	930677.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	166730.00	632879.64

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	818.24	91960.49
(ii) Non-Federal Share.....	3821.83	452652.33
(b) Other Federal Operating Expenditures.....	3220.00	32200.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	7860.07	576812.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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	900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	5900.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 .....	129827.50	341072.13
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	129827.50	341072.13
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	137687.57	923784.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	133865.74	471132.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	2500.00	160615.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	5900.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2500.00	154715.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4038.24	124160.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	152.86
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4038.24	124007.63

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

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

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

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

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Raj Mukherji

Mailing Address PO Box 2

City

Fanwood

State

NJ

Zip Code

07023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Impact NJ LLC

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 11ai-000035591

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**

Partner Share - Impact NJ  
LLC

**B.**

Full Name (Last, First, Middle Initial)

Michael Murphy

Mailing Address 172 West State Street, Suite 110

City

Trenton

State

NJ

Zip Code

08608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Impact NJ LLC

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 1 0

Transaction ID: 11ai-000035592

Amount of Each Receipt this Period

50.00

**[MEMO ITEM]**

Partner Share - Impact NJ  
LLC

**C.**

Full Name (Last, First, Middle Initial)

Stephen Kolesk

Mailing Address 155 York Road

City

Delran

State

NJ

Zip Code

08705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Virtua-Memorial Hospital  
Burlington Co

Occupation

COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 1 0

Transaction ID: 11ai-000035595

Amount of Each Receipt this Period

300.00

**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: PAGE 7 / 28

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Jennifer M. Carrillo-Perez

Mailing Address 347 Mount Pleasant Avenue

City

West Orange

State

NJ

Zip Code

07052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Trenk DiPasquale Webster  
Della Fera So

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Transaction ID: 11ai-000035597

Amount of Each Receipt this Period

100.00

## **[MEMO ITEM]**

Partner Share - Trenk DiP-  
asquale Webster Della Fera  
Sodono LLC

**B.**

Full Name (Last, First, Middle Initial)

Thomas M. Miller

Mailing Address 214 Country Club Drive

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: 11ai-000035606

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

AristaCare at Whiting

Mailing Address 51 Cragwood Road

City

South Plainfield

State

NJ

Zip Code

07080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: 11ai-000035607

Amount of Each Receipt this Period

1000.00

See Memo Items

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

1500.00

**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 8 / 28

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Sidney Greenberger

Mailing Address 51 Cragwood Road Suite 101

City State Zip Code  
 South Plainfield NJ 07080

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AristaCare at Whiting

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 0 6 / 2 0 1 0

Transaction ID: 11ai-000035608

Amount of Each Receipt this Period

1000.00

## **[MEMO ITEM]**

Partner Share - AristaCare  
at Whiting

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

0.00

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

1800.00



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

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

FOR LINE NUMBER: PAGE 9 / 28

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00000935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219626.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 4 / 2 0 1 0

Transaction ID: 12-16-09587-09809

Amount of Each Receipt this Period

150000.00

Transfer

**B.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

62952.02

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 1 0

Transaction ID: 12-00-00451-00451

Amount of Each Receipt this Period

3220.00

InKind-Voter File Access

**C.**

Full Name (Last, First, Middle Initial)  
Democratic National Committee

Mailing Address 430 South Capitol Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00010603

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

67952.02

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 1 0

Transaction ID: 12-01-07658-11858

Amount of Each Receipt this Period

5000.00

Transfer

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

158220.00

**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 10 / 28

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

C00000935

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

224386.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

Transaction ID: 12-16-09592-09826

Amount of Each Receipt this Period

4760.00

Transfer

**B.**

Full Name (Last, First, Middle Initial)

Ed Potosnak for Congress

Mailing Address PO Box 984

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing  
federal political committee.

**C**

C00474304

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5625.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 1 0

Transaction ID: 12-01-07665-11874

Amount of Each Receipt this Period

1250.00

Transfer

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

6010.00

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

164230.00

# **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)

PAGE 11 / 28

<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)

New Jersey Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol Street SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
InKind-Voter File Access

Candidate Name  
Democratic National Committee

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21b-00-00452-00452

Date of Disbursement

<sup>M</sup>  <sup>M</sup> /  <sup>D</sup>  <sup>D</sup> /  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>  <sup>Y</sup>

Amount of Each Disbursement this Period

3220.00

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

3220.00

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

3220.00

# **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)

PAGE 12 / 28

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

Nicole Scott-Harris

Mailing Address 300 Midland Avenue

City  
East Orange

State  
NJ

Zip Code  
07017

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09586-09806

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Nicole Scott-Harris

Mailing Address 300 Midland Avenue

City  
East Orange

State  
NJ

Zip Code  
07017

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09586-09807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.40

C.

Full Name (Last, First, Middle Initial)

US Postal Service - Newark

Mailing Address 494 Broad Street Room 223

City  
Newark

State  
NJ

Zip Code  
07102

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09588-09810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6597.00

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

6640.40

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

A. Form/Schedule : **SB30b**

Transaction ID :

Schedule B, Line 30b - Postage and Printing Services - The committee's report discloses transactions for postage and printing services. None of the underlying transactions relates to the printing or distribution of printed materials that meet any of the content standards of 11 CFR 109.21(c). The committee's report properly discloses this exempt activity.

# **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)

PAGE 14 / 28

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

US Postal Service - Newark

Mailing Address 494 Broad Street Room 223

City  
Newark

State  
NJ

Zip Code  
07102

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09588-09811

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

6597.00

B.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09589-09812

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

14061.00

C.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 30b-16-09589-09813

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

10037.00

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

30695.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 28

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09589-09814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14061.00

**B.**

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09589-09815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8839.00

**C.**

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09589-09816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10037.00

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

32937.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 28

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09589-09817

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

8839.00

B.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09589-09818

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

13466.00

C.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09589-09819

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

7885.00

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

30190.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 28

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

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

A.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09589-09820

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

13021.00

B.

Full Name (Last, First, Middle Initial)

Kennedy Communications Inc

Mailing Address 1730 M Street NW Suite 1010

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Printing Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09589-09821

Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

7885.00

C.

Full Name (Last, First, Middle Initial)

US Postal Service - Newark

Mailing Address 494 Broad Street Room 223

City  
Newark

State  
NJ

Zip Code  
07102

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 30b-16-09594-09828

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

3094.00

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

24000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 28

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A.**

Full Name (Last, First, Middle Initial)

US Postal Service - Newark

Mailing Address 494 Broad Street Room 223

City  
Newark

State  
NJ

Zip Code  
07102

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09594-09829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5287.00

**B.**

Full Name (Last, First, Middle Initial)

Nicole Scott-Harris

Mailing Address 300 Midland Avenue

City  
East Orange

State  
NJ

Zip Code  
07017

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09591-09824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.40

**C.**

Full Name (Last, First, Middle Initial)

Nicole Scott-Harris

Mailing Address 300 Midland Avenue

City  
East Orange

State  
NJ

Zip Code  
07017

Purpose of Disbursement  
Travel Expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 30b-16-09591-09825

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.70

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

5344.10

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

129806.50

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 19 / 28

NAME OF COMMITTEE (In Full)

**New Jersey Democratic State Committee****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>General Fundraising</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">25.00</div> %	<b>NONFEDERAL %</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">75.00</div> %  <b>Transaction ID:</b> H2-16
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>October 26, 2010 Event</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">25.00</div> %	<b>NONFEDERAL %</b> <div style="border: 1px solid black; padding: 2px; text-align: center;">75.00</div> %  <b>Transaction ID:</b> H2-65

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 20 / 28  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

NAME OF ACCOUNT

Transfers -- Bank  
of America

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	2		2	0	1	0

TOTAL AMOUNT TRANSFERRED

15497.48

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

15497.48

Transaction ID: H318a-01-07666

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

15497.48

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

15497.48

A. Form/Schedule : **H3**  
Transaction ID :

Lines 18(a) Non-Federal Transfers - The committee's report correctly reflects transfers of non-federal funds. The committee makes transfers from its non-federal account(s) to its federal account(s) within the statutory 70-day time period. Transfers typically occur toward the conclusion of a 60-day post disbursement period.

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 / 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Metropolitan Telecommunications

Mailing Address  
 PO Box 9660

City	State	Zip Code
Manchester	NH	03108-9660

Purpose of Disbursement:  
 Telecommunications Services

Category/  
Type

Activity or Event Identifier:  
 Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

464995.66

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: 21a-01-07647-11832

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

84.67

479.79

564.46

**B. Full Name (Last, First, Middle Initial)**  
 PSE&G

Mailing Address  
 PO Box 14444

City	State	Zip Code
New Brunswick	NJ	08906

Purpose of Disbursement:  
 Utilities

Category/  
Type

Activity or Event Identifier:  
 Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

465405.66

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: 21a-01-07648-11833

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

61.50

348.50

410.00

**C. Full Name (Last, First, Middle Initial)**  
 PSE&G

Mailing Address  
 PO Box 14444

City	State	Zip Code
New Brunswick	NJ	08906

Purpose of Disbursement:  
 Utilities

Category/  
Type

Activity or Event Identifier:  
 Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

465803.66

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	1	0

Transaction ID: 21a-01-07649-11834

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

59.70

338.30

398.00

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

205.87

1166.59

1372.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

A. Form/Schedule : **H4**  
Transaction ID :

Telecommunications Services - The committee's report discloses payments for telecommunications services, which is a description that represents telephone services including long distance, cellular, conference calling, fax services and telephone systems. No disbursement identified as telecommunications services is for the purpose of public communications as defined in federal regulations.

A. Form/Schedule : **H4**  
Transaction ID :

No transactions reported this period on schedule H4 for salary or insurance relate to employees who spent more than 25% of their time on FEA.

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
PSE&G

Mailing Address

PO Box 14444

City State Zip Code

New Brunswick NJ 08906

Purpose of Disbursement:  
UtilitiesCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

466065.66

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	1	0

Transaction ID: 21a-01-07650-11835

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

39.30

222.70

262.00

**B. Full Name (Last, First, Middle Initial)**  
Emergency Medical Associates - CHS

Mailing Address

PO Box 747

City State Zip Code

Livingston NJ 07039

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

466353.66

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	1	0

Transaction ID: 21a-01-07651-11841

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

43.20

244.80

288.00

**C. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address

PO Box 7247-0244

City State Zip Code

Philadelphia PA 19170-0001

Purpose of Disbursement:  
Delivery ServicesCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

466383.78

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	1	0

Transaction ID: 21a-16-09585-09805

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.52

25.60

30.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

87.02

493.10

580.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 28

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

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

Med-I-Bank

## Mailing Address

400-2 Totten Pond Road

City State Zip Code

Waltham MA 02451

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

466411.76

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	1	0

Transaction ID: 21a-01-07711-11939

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

23.78

27.98

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

ADP Payroll Services

## Mailing Address

1125 Virginia Drive

City State Zip Code

Fort Washington NJ 19034

Purpose of Disbursement:  
Payroll Processing FeesCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

466735.31

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	6	/	2	0	1	0

Transaction ID: 21a-01-07709-11937

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

48.53

275.02

323.55

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

TD Bank - Visa

## Mailing Address

PO Box 2580

City State Zip Code

Cherry Hill NJ 08034

Purpose of Disbursement:  
See Memo ItemsCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

467158.31

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	1	0

Transaction ID: 21a-01-07663-0056

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

63.45

359.55

423.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

116.18

658.35

774.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Stage Left

Mailing Address

5 Livingston Avenue

City	State	Zip Code
New Brunswick	NJ	08901

Purpose of Disbursement:  
 Food & Beverage

Category/Type

Activity or Event Identifier:  
 Admin 09/10

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 10 / 08 / 2010

Transaction ID: 21a-01-07663-11869

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

63.45

359.55

423.00

**B. Full Name (Last, First, Middle Initial)**  
 Premium Assignment Corporation

Mailing Address

PO Box 3100

City	State	Zip Code
Tallahassee	FL	32315-3100

Purpose of Disbursement:  
 Insurance

Category/Type

Activity or Event Identifier:  
 Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

467632.90

Date 10 / 08 / 2010

Transaction ID: 21a-01-07664-11870

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

71.19

403.40

474.59

**C. Full Name (Last, First, Middle Initial)**  
 ADP Payroll Services

Mailing Address

1125 Virginia Drive

City	State	Zip Code
Fort Washington	NJ	19034

Purpose of Disbursement:  
 Payroll Processing Fees

Category/Type

Activity or Event Identifier:  
 Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

467796.55

Date 10 / 08 / 2010

Transaction ID: 21a-01-07708-11936

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

24.55

139.10

163.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

95.74

542.50

638.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
 Choice Care Card

Mailing Address

76 McNeil Road Second Floor

City State Zip Code

Waterbury VT 05677

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
Admin 09/10

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

467849.05

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

Transaction ID: 21a-01-07707-11933

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.88

44.62

52.50

**B. Full Name (Last, First, Middle Initial)**  
 American Express

Mailing Address

PO Box 53852

City State Zip Code

Phoenix AZ 85072

Purpose of Disbursement:  
Credit Card Processing FeesCategory/  
TypeActivity or Event Identifier:  
General Fundraising

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43544.27

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	1	0

Transaction ID: 21a-01-07710-11938

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.60

7.81

10.41

**C. Full Name (Last, First, Middle Initial)**  
 E-OnlineData

Mailing Address

5 Milk Street

City State Zip Code

Portland ME 04101

Purpose of Disbursement:  
Credit Card Processing FeesCategory/  
TypeActivity or Event Identifier:  
General Fundraising

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43579.27

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	1	0

Transaction ID: 21a-01-07712-11940

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.75

26.25

35.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.23

78.68

97.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
Nova Information Systems

Mailing Address

7300 Chapman Highway

City	State	Zip Code
Knoxville	TN	37920

Purpose of Disbursement:  
Credit Card Processing Fees
Category/  
Type
Activity or Event Identifier:  
General Fundraising

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43684.08

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	1	0

Transaction ID: 21a-01-07713-11941

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.20		78.61		104.81

**B. Full Name (Last, First, Middle Initial)**  
US Postal Service - West Trenton

Mailing Address

555 Grand Avenue

City	State	Zip Code
Ewing	NJ	08628

Purpose of Disbursement:  
Postage
Category/  
Type
Activity or Event Identifier:  
October 26, 2010 Event

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

572.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: 21a-01-07659-11859

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
143.00		429.00		572.00

**C. Full Name (Last, First, Middle Initial)**  
The Heldrich Hotel

Mailing Address

10 Livingston Avenue

City	State	Zip Code
New Brunswick	NJ	08901

Purpose of Disbursement:  
Food & Beverage
Category/  
Type
Activity or Event Identifier:  
October 26, 2010 Event

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1072.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	1	0

Transaction ID: 21a-01-07662-11866

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.00		375.00		500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.20		882.61		1176.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
818.24		3821.83		4640.07