

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For 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

Pallone for Congress

ADDRESS (number and street)  
▼

PO BOX 3176

☐Check if different  
than previously  
reported. (ACC)

Long Branch

NJ

07740

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00226928

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

NJ

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)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2007

through

03

31

2007

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

Warren Goode

Signature of Treasurer

Electronically Filed by Warren Goode

Date

07

26

2007

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 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Pallone for Congress

Report Covering the Period:

From:

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

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	373648.88	390348.88
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	373648.88	390348.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	71317.49	116228.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	6.00	2805.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	71311.49	113422.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2707925.94	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

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

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Pallone for Congress

Report Covering the Period:

From:

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

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 7

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

188451.00

198851.00

(ii) Unitemized.....

2600.00

3900.00

(iii) TOTAL of contributions

from individuals..... ▶

191051.00

202751.00

(b) Political Party Committees.....

0.00

0.00

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

182597.88

187597.88

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)

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

373648.88

390348.88

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

0.00

0.00

## 13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

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

6.00

2805.20

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

18636.80

34664.41

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

392291.68

427818.49

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	71317.49	116228.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	22300.00	22605.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ➤	93617.49	138833.01

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2409251.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	392291.68
25. SUBTOTAL (add Line 23 and Line 24).....	2801543.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	93617.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2707925.94

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

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

FOR LINE NUMBER: PAGE 5 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Daniel Almeida

Mailing Address PO Box 443

City State Zip Code  
 Fords NJ 08863-0443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida Grove Mgt.

Occupation  
Real Estate

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 7

Transaction ID: A7231FC11DC3A4A8C867

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Dr. Richard Kahn, DDS

Mailing Address 76 Livingston Ave

City State Zip Code  
 New Brunswick NJ 08901-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Periodontist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 7

Transaction ID: A18C9D56C0B0B461CB61

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Robert Fagenson

Mailing Address 60 Broad St

City State Zip Code  
 New York NY 10004-2305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fagenson & Co., Inc.

Occupation  
Owner/member Of Nyse

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 9 / 2 0 0 7

Transaction ID: AF38D1BC44E844183B19

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2750.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Daniel B. Goldberg  
Mailing Address 7 Oyster Bay Rd

City State Zip Code  
Rumson NJ 07760-1822

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlantic Eye Physicians

Occupation  
Ophthalmologist

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Transaction ID: A7A9609104AC04A14B2C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Jagbir Beniwal  
Mailing Address 6 Horizon Drive

City State Zip Code  
Wayne NJ 07470-4966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Transaction ID: A3E08283E761640E386F

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Manmohan Trikha  
Mailing Address 360 Valley Rd.

City State Zip Code  
Watchung NJ 07069-6055

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 9 / 2 0 0 7

Transaction ID: AB8938121E81E46A3B7C

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Antaranig Berberian

Mailing Address 162 Lynam Rd

City State Zip Code  
 Stamford CT 06903-4516

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/a

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: AA8590B3DB2BF4798AFC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Agnes Varis

Mailing Address 150 Central Park South

City State Zip Code  
 New York NY 10019-1566

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Agvar Chemicals, Inc.

Occupation  
Owner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: A6EE711D6D5EA4D19BAE

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Karl Leichtman

Mailing Address 150 Central Park South

City State Zip Code  
 New York NY 10019-1566

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/a

Occupation  
Retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: A290FBD228627480384A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Dominick J. Mazza

Mailing Address 7 Decamp Ct

City

West Long Branch

State

NJ

Zip Code

07764-1165

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mazza & Sons

Occupation

Parnter

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: AAC2B958091434DBD95F

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mazin A. Kalian

Mailing Address 14 Sailers Way

City

Rumson

State

NJ

Zip Code

07760-1209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kalian Corp.

Occupation

President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 7

Transaction ID: A760D047A4D074BBBB77

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Gordon Litwin

Mailing Address 63 Borden Place

City

Little Silver

State

NJ

Zip Code

07739-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ansell, Zaro, Grimm & Aar-  
on

Occupation

Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 7

Transaction ID: AB22A65344FB94FBF9DF

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2500.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Escandon Mailing Address PO Box 211 City State Zip Code Allenhurst NJ 07711-0211 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Escandon & Fernicola Occupation Attorney/partner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 13 / 2007 <b>Transaction ID:</b> A974BE9D87E6E4F3C834 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Frederic Sterritt Mailing Address 464 S. Horizon Way City State Zip Code Branchburg NJ 08853-4026 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Raritan Valley Orthodontics Occupation Orthodontist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2007 <b>Transaction ID:</b> AD7DA42E0E41949F1919 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Raj Chopra Mailing Address 704 Demott Ct City State Zip Code Westbury NY 11590-5910 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Tishcon, Corp Occupation Chairman & CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2007 <b>Transaction ID:</b> A1CDA17167F9E40F6A5D Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Steiner			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7	
Mailing Address 5 Rocky Way, Llewellyn Park			<b>Transaction ID:</b> A576277C8C02F4CD0AE5	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00	
West Orange	NJ	07052		
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Steiner Equities Group		Occupation Owner		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
<b>B.</b> Full Name (Last, First, Middle Initial) Roy Tanzman			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address 4 Talia Rd			<b>Transaction ID:</b> A85909B75B553482ABBD	
City	State	Zip Code	Amount of Each Receipt this Period 1000.00	
Kendall Park	NJ	08824-1705		
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Wilentz Goldman & Spitzer		Occupation Attorney		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert A. Roe			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address PO Box 407			<b>Transaction ID:</b> AFC0B21FB499A447B812	
City	State	Zip Code	Amount of Each Receipt this Period 500.00	
Wayne	NJ	07474-0407		
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Robt. A. Roe Assn.		Occupation Govt Affairs		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Stephen Papetti

Mailing Address 7 Tricorne Ct

City

Holmdel

State

NJ

Zip Code

07733-1250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Asp Development

Occupation

Real Estate Development

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: AFE7229D896894A32B97

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Joseph M. Ariyan

Mailing Address 20 Ct St 4th Fl

City

Hackensack

State

NJ

Zip Code

07601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ariyan, Khoury & Schildin-  
er

Occupation

Attorney/owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: ADCE99A479CEA46D8B90

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Stephen T. Boswell

Mailing Address 40 Midland Ave

City

Wyckoff

State

NJ

Zip Code

07481-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boswell Engineering

Occupation

Engineer/partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: AF8B639ACA1E344E08C0

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Angela E. Jingoli

Mailing Address 5 Dorchester Ct

City State Zip Code  
 Princeton NJ 08540-4324

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/aOccupation  
Housewife

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

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

Transaction ID: A5A616B81F2524659846

Amount of Each Receipt this Period

1700.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Joseph R. Jingoli

Mailing Address 30 Woodmont Dr

City State Zip Code  
 Lawrenceville NJ 08648-2115

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jos. Jingoli & Son, Inc.Occupation  
Co-owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

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

Transaction ID: A01E2040258C9420284C

Amount of Each Receipt this Period

1600.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Michael D. Jingoli

Mailing Address 5 Dorchester Ct

City State Zip Code  
 Princeton NJ 08540-4324

FEC ID number of contributing federal political committee.

C

Name of Employer  
Jos. Jingoli & Son, Inc.Occupation  
Co-owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

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

Transaction ID: AA50E65B3272B4C0C8D3

Amount of Each Receipt this Period

1700.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy E. Staats Mailing Address 47 Orchard Ln City State Zip Code Colts Neck NJ 07722-1569 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Metzer-staats Pain Mgmt. Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 02 / 28 / 2007 <b>Transaction ID:</b> A80631C5A96E04CDE982 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) James Price Mailing Address 536 Navesink River Rd City State Zip Code Red Bank NJ 07701-6348 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ubs Financial Services, Inc. Occupation Eastern Div. Manager Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 01 / 2007 <b>Transaction ID:</b> AF36EEF5C0D474041927 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Berge Setrakian Mailing Address 191 Cedar St City State Zip Code Englewood NJ 07631-3130 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer LeBoeuf, Lamb, Greene & MacRae LLP Occupation Partner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 01 / 2007 <b>Transaction ID:</b> ADD8BD84D96474DD1B83 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Louise M. Simone Mailing Address 500 Park Ave #36 City State Zip Code New York NY 10022-1606 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation N/a Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>2300.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> AFA1CFDDC3BA4A62B38 Amount of Each Receipt this Period <div>2300.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ralph Izzo Mailing Address 55 Cranbury Neck Rd. City State Zip Code Cranbury NJ 08512-2008 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Pse&g CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>750.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> AA3E2ADD31C7E41F1ADC Amount of Each Receipt this Period <div>750.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Edward Segall Mailing Address 787 Ocean Ave City State Zip Code Long Branch NJ 07740-4973 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Seagulls Nest Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> ADA2951979C394CBFA73 Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4050.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Morris Brown Mailing Address 9 Fairway Ln City State Zip Code Ocean NJ 07712-3634 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wilentz, Goldman & Spitzer Occupation Attorney Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> AB6AFBB8434B14C6BB3A Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Seta N. Albrecht Mailing Address 582 Haworth Ave City State Zip Code Haworth NJ 07641-1537 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Everest Realty Co. Occupation Designer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> A5A53AF34063D40058C1 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Paul Billyard Mailing Address 600 Grassmere Ave City State Zip Code Interlaken NJ 07712-4317 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Evercore Partners Occupation Investment Banker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> A4AEA1CC01C1F44A1B3E Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 16 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Alfred Koeppe Mailing Address 141 Glimmer Glass Circle City State Zip Code Manasquan NJ 08736-3928 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Newark Alliance Lawyer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> A8D0C2F0B7BD3411DB29 Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ara Hovnanian Mailing Address 820 5th Aave City State Zip Code New York NY 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Hovnanian Enterprises President/ceo Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> A7233B13844FE4435ADD Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Herbert H. Sambol Mailing Address 440 W. 24th St Apt 17a City State Zip Code New York NY 10011-1372 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Centerbrook Investment Co. Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 05 / 2007</div> <b>Transaction ID:</b> A9E6E4C8BB9CB419B8A9 Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**3000.00**

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



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

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

FOR LINE NUMBER: PAGE 17 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Gage N Andretta Mailing Address 10 Bowers Rd City Caldwell State NJ Zip Code 07006-5703 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wolff & Samson Occupation Attorney Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> ADB199CCDA27440878A1 Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Gary Laermer Mailing Address 113 Tindall Road City Middletown State NJ Zip Code 07748-2321 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Community YMCA Occupation President & CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> AE2ADC54A59094254BF2 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Judith Stanley Coleman Mailing Address 578 Navesink River Rd City Red Bank State NJ Zip Code 07701-6348 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Investor & Community Leader Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> ADED3A95AB587454E961 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		2400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 18 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Laurence M. Smith

Mailing Address 4 Jaggar Ct

City State Zip Code  
 West Orange NJ 07052-2197

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson, Pc

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: AB44DFACE76994A5CB94

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Fredric P. Lavinthal

Mailing Address 9 Nicklaus Ct

City State Zip Code  
 Florham Park NJ 07932-2722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson, Pc

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: A92A87C76AAE04749819

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Bradley M. Campbell

Mailing Address 79 S. Main St

City State Zip Code  
 Lambertville NJ 08530-1826

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: A5DFC06DEA1D14E0DB6F

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1400.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Arthur S. Goldstein

Mailing Address 1 Oxbow Place

City

Upper Saddle River

State

NJ

Zip Code

07458-1731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson, PcOccupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: AB5E669B3D536441095A

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mitchell S. Berkey

Mailing Address 3 Vista Terr

City

Livingston

State

NJ

Zip Code

07039-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & SamsonOccupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: AFBFDF02B3FF84B18867

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Ara Marangosian

Mailing Address 110 Stone Fence Rd

City

Bernardsville

State

NJ

Zip Code

07924-1726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stirling Textiles & Chemi-  
calsOccupation  
Trader

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: A06670E801524423CB5C

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

David M. Hyman

Mailing Address 29 Boland Dr

City State Zip Code  
 West Orange NJ 07052-3675

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson, Pc

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: AFAC8FDA67944497390E

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Alfred Papetti

Mailing Address 1 Bellaire Ct

City State Zip Code  
 Colts Neck NJ 07722-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Papetti Holdings

Occupation  
Real Estate

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: AB51CF5EE7D9C47888DE

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

John M. Simon

Mailing Address 25 Schindler Terr

City State Zip Code  
 West Orange NJ 07052-1079

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wolff & Samson, Pc

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: A8ED8FE46E487492F858

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1900.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 158

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** William E. Goydan

Mailing Address 5 Lewis Ln

City

Chester

State

NJ

Zip Code

07930-2723

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Wolff & Samson, PcOccupation  
Attorney

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	7

**Transaction ID:** A430CDB5EABB34136BBE

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Daniel A. Schwartz

Mailing Address 43 Tremont Terr

City

Livingston

State

NJ

Zip Code

07039-3339

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Wolff & Samson, PcOccupation  
Attorney

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	7

**Transaction ID:** AA6A0BF3489B54C5487A

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Armen Shahinian

Mailing Address 277 Crest Place

City

Franklin Lakes

State

NJ

Zip Code

07417-2705

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Wolff & SamsonOccupation  
Attorney

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	7

**Transaction ID:** AC1AAB6124AB64A978B7

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Dennis M. Toft		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 85 Old Cannon Rd		<b>Transaction ID:</b> A8496031F0F214FCFBCA Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
City Berkeley Heights	State NJ	
Zip Code 07922-1604		
FEC ID number of contributing federal political committee. C		
Name of Employer Wolff & Samson, Pc	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Morris Bienenfeld		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 53 Warwick Ave		<b>Transaction ID:</b> A2F9CA68851B2451488F Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
City Teaneck	State NJ	
Zip Code 07666		
FEC ID number of contributing federal political committee. C		
Name of Employer Wolff & Samson	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. David Schlossberg		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 42 Tremont Ter.		<b>Transaction ID:</b> A3C6FD0FCCF8A433AA48 Amount of Each Receipt this Period 750.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
City Livingston	State NJ	
Zip Code 07039-3340		
FEC ID number of contributing federal political committee. C		
Name of Employer Wolff & Samson	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

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

1650.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Samson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address 10 Dorset Circle		<b>Transaction ID:</b> AB61746044BCF4C4C99E
City Caldwell	State NJ	Zip Code 07006-6125
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Wolff & Samson	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Richard C. White		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address 5035 Macomb St. NW		<b>Transaction ID:</b> A8F8CAC4FB2EA4D5B955
City Washington	State DC	Zip Code 20016-2674
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Alpine Group	Occupation Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Philip Murphy		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address 45 Blossom Cove Rd		<b>Transaction ID:</b> A7C00391BD82243B4918
City Red Bank	State NJ	Zip Code 07701-6302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Murphy Endeavors, LLC	Occupation Principal	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3800.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Tammy S. Murphy

Mailing Address 45 Blossom Cove Rd

City State Zip Code  
 Red Bank NJ 07701-6302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
N/a

Occupation  
Homemaker

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

**Transaction ID:** A03D8B1F886EE43E7BC4

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Thomas M. Duff

Mailing Address Box 190

City State Zip Code  
 Key Largo FL 33037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wellman, Inc.

Occupation  
Executive

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

**Transaction ID:** A7D829744D9E746FF934

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** John K. Lloyd

Mailing Address 11 Mohawk Ave

City State Zip Code  
 Oceanport NJ 07757-1619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Meridian Health System

Occupation  
CEO

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

**Transaction ID:** A422A3007C48E4AC8903

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4300.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Walter Kahn

Mailing Address 16 Tuxedo Rd

City

Rumson

State

NJ

Zip Code

07760-1825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 0 7

Transaction ID: AE3D41A5AC26E40B49A1

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Victor Scudieri

Mailing Address 3 Mtn St

City

Highlands

State

NJ

Zip Code

07732-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Interstate Electronics,  
Inc.Occupation  
Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Transaction ID: A7C2D2647BAB14377934

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. William L. Keller

Mailing Address 1528 Walnut St #1900

City

Philadelphia

State

PA

Zip Code

19102-3613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Keller & GogginOccupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 7

Transaction ID: AD9DBAED668364817BA9

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Dilip Verghese

Mailing Address 155 Union Ave

City State Zip Code  
 Middlesex Boro NJ 08866

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
D&K Construction Co., Inc.

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: AB01C1879A63C497DBB7

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Gerard L. Cafesjian

Mailing Address 4001 Tamiami Trail North #425

City State Zip Code  
 Naples FL 34103-3591

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Glc Enterprises

Occupation  
Pres. & CEO

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: A64323C4F989548A68F2

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Brian Torpey

Mailing Address 31 Deputy Minister Dr

City State Zip Code  
 Colts Neck NJ 07722-1829

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Professional Orthopaedic  
Assn.

Occupation  
Ortho Surgeon

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: AE1EBADA3AD984AB597D

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Cleo T. Cafesjian

Mailing Address 4001 Tamiani Trail North #425

City State Zip Code  
 Naples FL 34103-3591

FEC ID number of contributing federal political committee.

C

Name of Employer  
N/aOccupation  
Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: A4E1925C5AE4940C3BA9

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Marshall Knopf

Mailing Address 27 Monmouth St

City State Zip Code  
 Red Bank NJ 07701-6302

FEC ID number of contributing federal political committee.

C

Name of Employer  
M&m Knopf Auto PartsOccupation  
Pres.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: A9B8E68CD9A774C968CC

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Krishna Reddy

Mailing Address 1318 Bonita Dr

City State Zip Code  
 La Habra Heights CA 90631-8522

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Dentist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: A297263D245F94DA99B5

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Barry Rhoads Mailing Address 6793 Father John Ct City McLean State VA Zip Code 22101-2156 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Weber Shandwick Occupation Lobbyist Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> ABE814D782DB943CAA01 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Attilio Palumbo Mailing Address 5 Boyant Court City Wayside State NJ Zip Code 07712-1232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Palumbo's Restaurant Occupation Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A23461D72C50B4029ADB Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Igor Khalatian Mailing Address 3 Monticello Ct City Morganville State NJ Zip Code 07751-4162 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Sc Lab Llc Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> A6049B456D1814CDF8E2 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			

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

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

FOR LINE NUMBER: PAGE 29 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Marc Lory

Mailing Address 9 Tanya Circle

City State Zip Code  
Ocean NJ 07712-7920

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Meridian Health System

Occupation  
Executive Vice President & COO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

03 / 20 / 2007

Transaction ID: AF02866BCA2BD44E0BA2

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

David Katz

Mailing Address 1975 Swarthmore Ave

City State Zip Code  
Lakewood NJ 08701-4534

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bonita Marie Intl

Occupation  
President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

03 / 20 / 2007

Transaction ID: A3731E977F55243089CB

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Phyllis Kinsler

Mailing Address 70 Wigwam Ln

City State Zip Code  
Tinton Falls NJ 07724-3176

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Planned Parenthood Of Mon.  
City

Occupation  
Exec. Director

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

03 / 20 / 2007

Transaction ID: A25EA12532B724925AD6

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Terhune Mailing Address 1333 New Hampshire Ave, NW City Washington State DC Zip Code 20036-1500 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Akin Gump Strauss Hauer & Feld Occupation Partner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2007 <b>Transaction ID:</b> A461F2695F75148AC995 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard G. Fernicola, MD Mailing Address 7 Spier Ave City Allenhurst State NJ Zip Code 07711-1116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2007 <b>Transaction ID:</b> A7618CD13BD85439BB29 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Hirair Hovnanian Mailing Address 600 Navesink River Rd City Red Bank State NJ Zip Code 07701-6347 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer H. Hovnanian Industries Occupation Owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 20 / 2007 <b>Transaction ID:</b> A990E6FE592D643C3AEB Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Dennis Drazin

Mailing Address 25 Reckless Place

City State Zip Code  
 Red Bank NJ 07701-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Drazin & Warshaw

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 0 7

Transaction ID: A2939C100DD124FFEEAAA

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mukesh N. Roy

Mailing Address 4147 Hill Terrace Drive

City State Zip Code  
 Sinking Spring PA 19608-9387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

Transaction ID: A92FE4A42417149C5BE5

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Shanti Roy

Mailing Address 6 Alton Way

City State Zip Code  
 Scotch Plains NJ 07076-2858

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Na

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

Transaction ID: ABB4FD0D3DE8B4215BD3

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Shivang Vyas Mailing Address 70 Camerons Ct City State Zip Code Covington GA 30016-1149 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 2 / 2 0 0 7           </div> <b>Transaction ID:</b> A213AD76E036D45A7A20 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Binay Sugla Mailing Address 251 South Holland Road City State Zip Code Holmdel NJ 07733-1215 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mobile Matrix Inc. Occupation Chairman & CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 2 / 2 0 0 7           </div> <b>Transaction ID:</b> AF600373CBF324677988 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Blacato Mailing Address 138 N Jackson St. City State Zip Code Arlington VA 22201-1244 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Matz Blacato & Associates Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">500.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 3 / 2 0 0 7           </div> <b>Transaction ID:</b> A5A9DE73FD4384F7DB82 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2000.00****TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER: PAGE 33 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Stephen Defelice

Mailing Address 235 Munsee Way

City

Westfield

State

NJ

Zip Code

07090-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fdn For Innovation In Med-  
icine

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: A271701667EDA4F239A3

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Richard D. McOmber

Mailing Address PO Box 308

City

Rumson

State

NJ

Zip Code

07760-0308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mcomber & Mcombaer

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: A8ED0EF0D72554F59941

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Eleanor Izdebski

Mailing Address 713 Green Valley Rd

City

Jackson

State

NJ

Zip Code

08527-2945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brouwer & Izdebski Insura-  
nce

Occupation  
Office Mgr.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: A98748CB6D4264944B8D

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Richard L Faherty

Mailing Address 36 Clark Rd

City

Port Jervis

State

NY

Zip Code

12771-3305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bio Reference, Inc.

Occupation

CIO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: A1F5AFC371E864D37845

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Marc Grodman, MD

Mailing Address 392 Fairmont Road

City

Califon

State

NJ

Zip Code

07830-3541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bio Reference, Inc.

Occupation

President & CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

Transaction ID: AF42D24D9A67D49549AB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Harris Bass

Mailing Address 11 Mann Ct

City

Monmouth Beach

State

NJ

Zip Code

07750-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Periscope, Inc.

Occupation

Mfg. Exec.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 7

Transaction ID: ACBE56AB84367439AA7E

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Angelo A. Chinnici, MD

Mailing Address 601 Sunset Ave

City State Zip Code  
 Asbury Park NJ 07712-5313

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 8 / 2 0 0 7

Transaction ID: A65603BC466004A57A8E

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Leon Ariyan

Mailing Address 3 Appleman Way

City State Zip Code  
 Bridgewater NJ 08807-3810

FEC ID number of contributing federal political committee.

C

Name of Employer  
Worldwide ExpressOccupation  
Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 8 / 2 0 0 7

Transaction ID: AD627F9D5AE6641048AF

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Tom Hardell

Mailing Address 416 Tenth Ave Nj

City State Zip Code  
 Manchester Townshi NJ 08759

FEC ID number of contributing federal political committee.

C

Name of Employer  
George Harius Const. Co.Occupation  
Construction

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A83323E5905F34FFA8BE

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Avakian		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 233 Corlies Ave		<b>Transaction ID:</b> AD00E2178F9224363912
City Allenhurst	State NJ	Zip Code 07711-1047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Leon S. Avakian	Occupation Engineer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

<b>B.</b> Full Name (Last, First, Middle Initial) Robert A. Briant, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 75 Morris Ave		<b>Transaction ID:</b> A1D5192085C054E709F9
City Manasquan	State NJ	Zip Code 08736-3521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Utility & Transp. Contractors	Occupation Exec. Director	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

<b>C.</b> Full Name (Last, First, Middle Initial) Charles J. Uliano		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 5 Marc Rd		<b>Transaction ID:</b> A7266726949B84DD7B72
City West Long Branch	State NJ	Zip Code 07764-1113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Chamlin Rosen Uliano Withering	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nelson Ferreira Mailing Address 3121 Route 22 East City Branchburg State NJ Zip Code 08876-3559 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ferreira Construction Occupation Owner Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 29 / 2007 <b>Transaction ID:</b> A52DB1881F5DF48218D9 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert A. Briant Mailing Address 154 Cranbaerry Ave City Bay Head State NJ Zip Code 08742-5020 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Utility & Transp. Contractors Occupation Executive Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 29 / 2007 <b>Transaction ID:</b> A79567E2312E74D808A4 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Richard M Maser Mailing Address 68 Rivergate Way City Long Branch State NJ Zip Code 07740-7868 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Maser Consulting P.A. Occupation Consulting Engineer Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 29 / 2007 <b>Transaction ID:</b> A102624D92C034CCC8A9 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Roger Mumford

Mailing Address PO Box 183

City State Zip Code  
 Colts Neck NJ 07722-0183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Real Estate/building

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A1DA4B3116EB04E51A61

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Norman Konvitz

Mailing Address 1218 West Park Ave

City State Zip Code  
 Ocean NJ 07712-7222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Intl Fidelity Ins. Co.

Occupation  
Exec. VP

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A90DD220E3CFC479BB46

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Gerard L Burdi

Mailing Address 37 Pacer Ct

City State Zip Code  
 Basking Ridge NJ 07920-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Union Paving & Const. Co.

Occupation  
Civil Engineer

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A56FC636C4A1F44B0BA8

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Sturgul		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 312 Silver St.		<b>Transaction ID:</b> AF06FBD67A6714CAD918
City Hurley	State WI	Zip Code 54534-1254
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Nadeem A. Baig		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 31 Gladstone Dr.		<b>Transaction ID:</b> AB07BE5158BD74417989
City East Brunswick	State NJ	Zip Code 08816-3930
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) William Basri		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 15 Oyster Bay Dr		<b>Transaction ID:</b> A253FF9D29155450B824
City Rumson	State NJ	Zip Code 07760-1822
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Physician	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Stephen Westhoven  
Mailing Address 333 Woodland Ave

City State Zip Code  
Avon By The Sea NJ 07717-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nj Resources

Occupation  
Manager

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A68F0ED7163B24FD3ADC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Joseph Shields  
Mailing Address 250 Medjay Ln

City State Zip Code  
Toms River NJ 08755-1013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nj Resources

Occupation  
VP

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: AAEECEB25438C4FB3838

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Stephen C. Schueler  
Mailing Address 611 Ocean Ave #105

City State Zip Code  
Bradley Beach NJ 07720-1371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: AB056A572FAEC4673BB1

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Scott Woska

Mailing Address 100 Farm Bridge Road

City State Zip Code  
 Marlboro NJ 07746-4852

FEC ID number of contributing federal political committee.

C

Name of Employer  
Shore Orthopedic GroupOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A11EBF640F75742E189F

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Howard N Guss

Mailing Address 22 Buckingham Dr

City State Zip Code  
 Ocean NJ 07712-3236

FEC ID number of contributing federal political committee.

C

Name of Employer  
Shore Health GroupOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A5EAD6D74DB8145E19CA

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Thomas C Fiest

Mailing Address 12 Nottingham Rd

City State Zip Code  
 Ocean NJ 07712-2516

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A7F31EFFC0FEC4F10BA0

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Thaddeus J Grabow

Mailing Address 33 Circle Dr

City State Zip Code  
 Rumson NJ 07760-2301

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A86833F27C0834A8D94F

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Robert F. Brogan

Mailing Address 1712 Martin Rd

City State Zip Code  
 Wall Township NJ 07753-7118

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A4FBBDC17A5E34B39889

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Glen Lockwood

Mailing Address 19 Hillcrest Ct

City State Zip Code  
 Skillman NJ 08558-1402

FEC ID number of contributing federal political committee.

C

Name of Employer  
Nj ResourcesOccupation  
CFO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A3F726F540CBB40E596D

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Glen Lockwood

Mailing Address 19 Hillcrest Ct

City State Zip Code  
Skillman NJ 08558-1402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nj Resources

Occupation  
CFO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A5365A79DEDB04E8AAF3

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Jerold Zaro

Mailing Address 86 Wickapecko Dr

City State Zip Code  
Ocean NJ 07712-4161

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ansell Zaro Grimm & Aaron

Occupation  
Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A08D856DD1FB7437891C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Kenneth E. Pringle

Mailing Address 203 1st Ave

City State Zip Code  
Belmar NJ 07719-2090

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pringle & Quinn

Occupation  
Attorney/partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A63A04B1A3ADA49D588E

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Claire M. Codey Mailing Address 100 Flyaway Dr City State Zip Code Kiawah Island SC 29455-5702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N/a Occupation Housewife Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>			Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> A45C066A83FC74184865 Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Jack Rudin Mailing Address 241 Central Park W. City State Zip Code New York NY 10024-4530 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Rudin Mgmt. Co. Occupation Builder/owner Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>4600.00</div>			Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> A95AE811E063F4E16B62 Amount of Each Receipt this Period <div>2300.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jack Rudin Mailing Address 241 Central Park W. City State Zip Code New York NY 10024-4530 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Rudin Mgmt. Co. Occupation Builder/owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>4600.00</div>			Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> A5446159BC34A4F8A822 Amount of Each Receipt this Period <div>2300.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶			<div>5600.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶			<div></div>

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

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

FOR LINE NUMBER: PAGE 45 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Rahul B. Shukla

Mailing Address 38 Quail Run

City

Warren

State

NJ

Zip Code

07059-7101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S. S. White Technologies

Occupation

Pres. & CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A07D6AC4A4C1A4A69B2A

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Shant Hovnanian

Mailing Address 520 Navesink River Rd

City

Red Bank

State

NJ

Zip Code

07701-6348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Speedusny Com

Occupation

Partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A952CE987E84549D39C0

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Scott Metzger

Mailing Address 10 Polazzo Grande

City

Morganville

State

NJ

Zip Code

07751-4462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: AFB4D18D3A6F2444BA8B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3800.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Laurence Downes Mailing Address PO Box 1468 City State Zip Code Wall NJ 07719-1468 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Nj Resources Corp. CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>2300.00</div>		Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> A6670194F119044C3817 Amount of Each Receipt this Period <div>2000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Laurence Downes Mailing Address PO Box 1468 City State Zip Code Wall NJ 07719-1468 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Nj Resources Corp. CEO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>2300.00</div>		Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> A1F691F79C8DE48D58D3 Amount of Each Receipt this Period <div>300.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Rospos Mailing Address 6 Inlet Terr City State Zip Code Belmar NJ 07719-2142 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Birdsall Engineering Engineer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>03 / 30 / 2007</div> <b>Transaction ID:</b> AB377436C0CB44A89863 Amount of Each Receipt this Period <div>1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<div>3300.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<div></div>

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

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

FOR LINE NUMBER: PAGE 47 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rajiv Uppal Mailing Address 19 Hillcrest Dr City State Zip Code Colts Neck NJ 07722-2227 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> AD067530D74EE4BC98D4 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Sperduto Mailing Address 245 Lake Rd City State Zip Code Brick NJ 08724-3454 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Nj Resources Occupation VP Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> A72D71052BB26442B8B6 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Vijay Singh Mailing Address 1111 Houghteling St City State Zip Code Iron Mountain MI 49801-6633 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Pain Diagnostic Assoc. Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A81FB86626C434B3AA04 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 158

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Francis Saldanha Mailing Address 8 Kit Road City Charleston State WV Zip Code 25304-2768 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A1114D43EF5304389B7F Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		3	1		2	0	0	7														
1000.00																							
<b>B.</b> Full Name (Last, First, Middle Initial) Mayo Frederick Friedlis Mailing Address 9500 Lost Trail Way City Potomac State MD Zip Code 20854-2092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Capitol Spine & Pain Center Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A0497585077E3471B81B Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		3	1		2	0	0	7														
1000.00																							
<b>C.</b> Full Name (Last, First, Middle Initial) Sairam L. Atluri Mailing Address 10160 Meadowknoll Dr City Loveland State OH Zip Code 45140-4900 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Aicc Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: ABF044E9CBE364B63B2A Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	7	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		3	1		2	0	0	7														
500.00																							

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

2500.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Laxmaiah Manchikanti Mailing Address 2075 Natchez Ln City Paducah State KY Zip Code 42001-5415 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Pain Management Center of Paducah Occupation Medical Director Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A3C5B26BE044D406B81A Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Francoise Singh Mailing Address 1111 Houghteling St City Iron Mountain State MI Zip Code 49801-6633 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Pain Diagnostic Assn. Occupation Administrator Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> AC2347BCABF294CB89D7 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Staniford Helm, II Mailing Address 1808 Calle De Los Alamos City San Clemente State CA Zip Code 92672-4307 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A5DE7082CD442463FB88 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**5300.00**

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

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

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

FOR LINE NUMBER: PAGE 50 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Joseph Elias Mouhanna

Mailing Address 13500 SW 69th Ct

City State Zip Code  
 Pinecrest FL 33156-6946

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: A771A047756284851938

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Vidyasagar Pampati

Mailing Address 220 Mohawk Dr

City State Zip Code  
 Paducah KY 42001-5414

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pain Magmt Center of Padu-  
cah

Occupation  
Statistician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: A597B793AA2AF4E8C959

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Gurpreet Padda

Mailing Address 6918 Washington

City State Zip Code  
 University City MO 63130-4308

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ctr-interventional Pain  
Mgmt

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: AE5BCD14056F840A9A3D

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4800.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Ramsin Benyamin

Mailing Address 5 Mallard Ct.

City State Zip Code  
Bloomington IL 61704-4803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Millennium Pain Center

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2007

Transaction ID: A54D8DB11FCC7433DAFC

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Ruth Saldanha

Mailing Address 8 Kit Rd.

City State Zip Code  
Charleston WV 25304-2768

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Na

Occupation  
Homemaker

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2007

Transaction ID: A7B7DBBB1318E4B449D7

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Charles F. Gordon

Mailing Address 2 Autumn Ln

City State Zip Code  
Saratoga Springs NY 12866-8747

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2007

Transaction ID: A1440DF7AF877484AA8B

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3750.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Murali Manchikanti Mailing Address 366 Longview Dr City Paducah State KY Zip Code 42001-5971 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ambulatory Surgery Center Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A483E0C5E47334D4C994 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph F. Jasper Mailing Address 2611 Lemons Beach Rd W. City University Place State WA Zip Code 98466-1833 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer West Tacoma Surgery Center Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A003C5BC75D684198882 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph F. Jasper Mailing Address 2611 Lemons Beach Rd W. City University Place State WA Zip Code 98466-1833 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer West Tacoma Surgery Center Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> ABDCB631AE3304697907 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		2600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 53 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David M. Schultz Mailing Address 5950 Ridge Rd City Excelsior State MN Zip Code 55331-9148 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Medical Advanced Pain Speciali Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> AFF766241903E4477928 Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) David M. Schultz Mailing Address 5950 Ridge Rd City Excelsior State MN Zip Code 55331-9148 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Medical Advanced Pain Speciali Occupation Physician Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> ABFA3DAFC9A974FF3AEC Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Michael Burdine Mailing Address 2267 Cedardale Ave. City Baton Rouge State LA Zip Code 70808-2812 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> AB55A3EA7CDEE4FA6B19 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		6600.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 54 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Carlos J. Giron Mailing Address 3356 Vineville Ave City Macon State GA Zip Code 31204-2328 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self - Georgia Pain Institute Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A44F76DCAC15A470CA6E Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Sharada Pampati Mailing Address 90 Martin Circle City Paducah State KY Zip Code 42001-5410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N/a Occupation Housewife Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A1550D30F686948109A2 Amount of Each Receipt this Period 1500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bharat C. Shah Mailing Address 28649 Waybridge Dr City Westlake State OH Zip Code 44145-6754 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Comprehensive Pain Care Ctr. Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A568358EEE92F4192A93 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Allan Thomas Parr

Mailing Address 7170 Edgewater Dr

City	State	Zip Code
Mandeville	LA	70471-7432

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Northshore Interventional  
Pain Mgt.Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	7

Transaction ID: AF54A7087F7074A8C83B

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Jimmy Ponder

Mailing Address 209 Country Club Blvd

City	State	Zip Code
Thibodaux	LA	70301-3705

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Headache & Pain Center,  
AmcOccupation  
Physician/owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	7

Transaction ID: A3BD53563BB7A4AA9950

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Andrea M. Trescot

Mailing Address 2558 Admirals Walk Dr S.

City	State	Zip Code
Orange Park	FL	32073-6102

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
The Pain CenterOccupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	7

Transaction ID: ABA9703D3576F495D9C7

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

6300.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 158

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Marilyn Berry Thompson Mailing Address 236 Westwood Rd City State Zip Code Annapolis MD 21401-1251 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Jordan Burt Boros Cicchet- Lobbyist ti E Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> AE2CC722161194768A1A Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Marilyn Berry Thompson Mailing Address 236 Westwood Rd City State Zip Code Annapolis MD 21401-1251 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Jordan Burt Boros Cicchet- Lobbyist ti E Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A58DCC8FC81314A8D99B Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Betsy Rivera Mailing Address 220 Hunting Creek City State Zip Code Paducah KY 42003-8762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation N/a Housewife Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> AF87873A6E68D485A947 Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**4300.00****TOTAL** This Period (last page this line number only) .....



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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Chandrakala Manchikanti Mailing Address 2075 Natchez Ln City Paducah State KY Zip Code 42001-5415 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer K5a Enterprise, Inc. Occupation Business Woman Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A9427044B1C764B5484C Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Frank Falco Mailing Address 108 Woodale Dr City Kennett Square State PA Zip Code 19348-2584 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mid-atlantic Spine Occupation Pain Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A31F624471D5D40F7876 Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Peter S. Staats Mailing Address 47 Orchard Ln City Colts Neck State NJ Zip Code 07722-1569 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Metzger Pain Management Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A17B2BC56D1F5405AA93 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

6600.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Jose Rivera

Mailing Address 220 Hunting Creek

City State Zip Code  
 Paducah KY 42003-8762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pain Mgmt Center Of Paducah

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: A5329ADAAA4084967A22

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Praveen Suchdev

Mailing Address 4 Gilboa Ln

City State Zip Code  
 Nashua NH 03062-2269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pain Solutions

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: A6E92CE6B6BF54AC48AF

Amount of Each Receipt this Period

1001.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Ram Manchikanti

Mailing Address 105 Paddock Ct

City State Zip Code  
 Paducah KY 42003-8736

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ambulatory Surgery Center

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 7

Transaction ID: A854800F59EC34E5D97C

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5301.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 59 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Dan Car Associates, LTD

Mailing Address 136 Central Ave.

City State Zip Code  
 Clark NJ 07066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 7

**Transaction ID:** AC1D45F6D05534CF69C1

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Boraie Development LLC

Mailing Address 120 Albany St. Suite #305

City State Zip Code  
 New Brunswick NJ 08901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 7

**Transaction ID:** A91BAAA0FD74B4867B64

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Omar Boraie

Mailing Address 120 Albany St #305

City State Zip Code  
 New Brunswick NJ 08901-2126

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Spring St. Development

Occupation  
President & CEO

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 8 / 2 0 0 7

**Transaction ID:** A0160565555CE40AC9B5

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Boraie Development LLC

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

1250.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Doctors Choice for Low Vision

Mailing Address 700 Route 70

City State Zip Code  
 Lakewood NJ 08701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 7

Transaction ID: A03CD83B729D54DDDB33

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Harvey Richmond

Mailing Address 725 Boston Blvd.

City State Zip Code  
 Sea Girt NJ 08750-2512

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Optomotrist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 7

Transaction ID: A6A05929426AD4FFB830

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Doctors Cho-  
ice for Low Vision

Full Name (Last, First, Middle Initial)

**C.** Genova, Burns & Vernola

Mailing Address 354 Eisenhower Pkwy

City State Zip Code  
 Livingston NJ 07039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 9 / 2 0 0 7

Transaction ID: A704DB8B1B3CB4AC7B6B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Angelo Genova

Mailing Address 9 Fredrick Ct

City

Cedar Grove

State

NJ

Zip Code

07009-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Genova, Burns, & Vernola

Occupation

Attorney/partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: A39D2B81AD04740D9962

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Partnership: Genova, Burns  
& Vernola

Full Name (Last, First, Middle Initial)

B. James Burns

Mailing Address 1 Bowtell Ct

City

Middletown

State

NJ

Zip Code

07748-3003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Genova, Burns, Vernola

Occupation

Attorney/partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 9 / 2 0 0 7

Transaction ID: AC437126109B24BAF98C

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Partnership: Genova, Burns  
& Vernola

Full Name (Last, First, Middle Initial)

C. Oak Tree Plaza Associates, LLC

Mailing Address 53 Westfield Ave.

City

Clark

State

NJ

Zip Code

07066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

Transaction ID: A7DC12B81280A4E259D1

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Binod P. Sinha

Mailing Address 3 Helene Dr

City State Zip Code  
 Edison NJ 08820-2561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

Transaction ID: A5AB042435CFA4B4EAF0

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Partnership: Oak Tree Pla-  
za Associates, LLC

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

Spadaro & Hilson

Mailing Address 90 Woodbridge Center Dr. #610

City State Zip Code  
 Woodbridge NJ 07095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: ADFFA81E450F444168B4

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

George A. Spadaro

Mailing Address 90 Woodbridge Center Dr #610

City State Zip Code  
 Woodbridge NJ 07095-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Spadaro & Hilson

Occupation  
Attorney/partner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: A71D5F832C557497D819

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Partnership: Spadaro & Hi-  
lson

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

500.00

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

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Oak Tree Plaza Associates, LLC

Mailing Address 53 Westfield Ave.

City State Zip Code  
 Clark NJ 07066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

Transaction ID: A9E1DEEF797C740E9BAF

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Sudhanshu Prasad

Mailing Address 15 Marion St

City State Zip Code  
 Edison NJ 08820-2559

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Rahway Medicin Assoc.

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

Transaction ID: AF43ECF5B175E45408DB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Oak Tree Pla-  
za Associates, LLC

Full Name (Last, First, Middle Initial)

**C.** Hoagland Longo Moran Dunst & Doukas

Mailing Address 40 Paterson St.

City State Zip Code  
 New Brunswick NJ 08901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: AFE5D49A248D94EE3B10

Amount of Each Receipt this Period

2700.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3700.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 64 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** James J Kinneally

Mailing Address 42 Virginia Ave

City State Zip Code  
 Manasquan NJ 08736-3503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hoagland Longo Moran Dunst  
& D

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A8BBF565F7BF443F696A

Amount of Each Receipt this Period

900.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Hoagland Longo Moran Dunst & Doukas

Full Name (Last, First, Middle Initial)

**B.** Michael Baker

Mailing Address 40 Peterson St

City State Zip Code  
 New Brunswick NJ 08901-1205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hoagland, Longo, et al

Occupation  
Attorney/partner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A98209B47689749D58C4

Amount of Each Receipt this Period

900.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Hoagland Longo Moran Dunst & Doukas

Full Name (Last, First, Middle Initial)

**C.** Thomas Jose Walsh

Mailing Address 7 Helen Rd

City State Zip Code  
 Clinton NJ 08809-1359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hoagland Longo Moran Dunst  
& D

Occupation  
Attorney

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A696523E1688E4CEA857

Amount of Each Receipt this Period

900.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Hoagland Longo Moran Dunst & Doukas

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

0.00

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



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

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

FOR LINE NUMBER: PAGE 65 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Satellite Self Storage Of Shrewsbury

Mailing Address 2126 Kings Hwy.

City State Zip Code  
Ocean NJ 07712

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

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

**Transaction ID:** A3B28C4CE576A4D19B4A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Benjamin Mann, Sr.

Mailing Address 23 Mann Ct

City State Zip Code  
Monmouth Beach NJ 07750-1052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Satellite Self Storage

Occupation  
Partner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 490.00

Date of Receipt

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

**Transaction ID:** A42A5C03B5FA24CCBB1E

Amount of Each Receipt this Period

490.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Satellite Se-  
lf Storage Of Shrewsbury

Full Name (Last, First, Middle Initial)

**C.** Benjamin Mann, Jr

Mailing Address 870 Ocean Ave

City State Zip Code  
Long Branch NJ 07740-4734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Satellite Self Storage

Occupation  
Self Storage/partner

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 510.00

Date of Receipt

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

**Transaction ID:** A124E491F84FA4173887

Amount of Each Receipt this Period

510.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Satellite Se-  
lf Storage Of Shrewsbury

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 158

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Shore Orthopaedic Group

Mailing Address 35 Gilbert St. South

City State Zip Code  
Tinton Falls NJ 07701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A281F52026770465980F

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Cary D. Glastein

Mailing Address 84 W. River Rd

City State Zip Code  
Rumson NJ 07760-1139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Shore Orthopaedic Group

Occupation  
Physician

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 09 / 2007

**Transaction ID:** A6915DB049DCC41188EF

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

Partnership: Shore Orthop-  
aedic Group

Full Name (Last, First, Middle Initial)

**C.** Impact Texas Communications

Mailing Address P.O. Box 93245

City State Zip Code  
Lubbock TX 79493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 01 / 2007

**Transaction ID:** A01829D924D5C47BDA94

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 158

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Todd Smith

Mailing Address P.O. Box 93245

City

Lubbock

State

TX

Zip Code

79493-3245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Impact Texas Communicatio-  
ns

Occupation

Partner

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	0	7

Transaction ID: AE5BB0FB144224C74A2D

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Partnership: Impact Texas  
Communications

Full Name (Last, First, Middle Initial)

B. Richard D. Stone

Mailing Address 2038 Winged Foot Ct.

City

Reston

State

VA

Zip Code

20191-1346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Impact Texas Communicatio-  
ns

Occupation

Partner

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	0	7

Transaction ID: AF8638FD4825F42D1BF4

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**Partnership: Impact Texas  
Communications

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

0.00

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

188451.00

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

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

FOR LINE NUMBER: PAGE 68 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Morongo Band of Mission Indians

Mailing Address 11581 Potrero Rd.

City State Zip Code  
 Banning CA 92220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

**Transaction ID:** ACDC23C60FD5C4983AAB

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Twenty-Nine Palms Band of Mission Indians

Mailing Address 46-200 Harrison Pl.

City State Zip Code  
 Coachella CA 92236

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 3 / 2 0 0 7

**Transaction ID:** ACE3F306002164DD9878

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Podiatry Pac

Mailing Address 9312 Old Georgetown Rd.

City State Zip Code  
 Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C**

c00008839

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 4 / 2 0 0 7

**Transaction ID:** AB376030D34A645979D2

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer Assn. Of Clinical Urologists Pac

Mailing Address 1111 Plaza Dr. #550

City State Zip Code  
Schaumburg IL 60173

FEC ID number of contributing  
federal political committee.

**C** C00273003

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

02 / 20 / 2007

**Transaction ID:** AE30E32FF6B494BD39BB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Cmte On Pol. Action Of Amer. Postal Work

Mailing Address 1300 L St. Nw

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00010322

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

02 / 20 / 2007

**Transaction ID:** A0DCE30B6078C4C42B36

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Miccosukee Tribe of Indian of Florida

Mailing Address P.O. Box 440021, Tamiami Station

City State Zip Code  
Miami FL 33144

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

02 / 20 / 2007

**Transaction ID:** A36941CD49B2C41579B1

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Twenty-Nine Palms Band of Mission Indians

Mailing Address 46-200 Harrison Pl.

City State Zip Code  
 Coachella CA 92236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 3 / 2 0 0 7

Transaction ID: A5E52AD15373746ADA24

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** The Chickasaw Nation

Mailing Address 1500 North Country Rd.

City State Zip Code  
 Ada OK 74820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: AA8814B14379346F3A85

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Puyallup Tribal of Indians

Mailing Address 3009 East Portland Ave.

City State Zip Code  
 Tacoma WA 98404-4996

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

Transaction ID: AA704281B18364E4A9E5

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4300.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** St. Regis Mohawk Tribal Council

Mailing Address 412 State Route 37

City State Zip Code  
 Akwesasne NY 13655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

**Transaction ID:** A730177A097104621862

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** San Manuel Tribal Administration

Mailing Address 26569 Community Center Drive

City State Zip Code  
 Highland CA 92346

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

**Transaction ID:** A75F484A872E748A696A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Shakopee Mdewakanton Sioux Community

Mailing Address 2330 Sioux Trail, NW

City State Zip Code  
 Prior Lake MN 55372

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

**Transaction ID:** A4D0758B8BC7D44E2809

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nisqually Indian Community Council Mailing Address 4820 She-Nah-Num Drive, S.E. City Olympia State WA Zip Code 98513-9199 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 26 / 2007 <b>Transaction ID:</b> A4BEA53CECA2F48DC9A7 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Fond du Lac Mailing Address 1720 Big lake Rd. City Cloquet State MN Zip Code 55720 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 26 / 2007 <b>Transaction ID:</b> A8B8698734A204573AF8 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Soboba Tribe of Luiseno Indians Mailing Address P.O. Box 487 City San Jacinto State CA Zip Code 92581 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 26 / 2007 <b>Transaction ID:</b> A59EA53B0B0DA4930B80 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



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

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

FOR LINE NUMBER: PAGE 73 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Barona Band of Mission Indians  
Mailing Address 1095 Barona Rd.

City State Zip Code  
Lakeside CA 92040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: A89ABC0F56F2C4D219B2

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Lummi Nation  
Mailing Address 2616 Kwina Road

City State Zip Code  
Bellingham WA 98226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: A055E63777146478AA3B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Internation Game Technology Pac  
Mailing Address 9295 Prototype Dr.

City State Zip Code  
Reno NV 89511

FEC ID number of contributing  
federal political committee.

C

c00316331

Name of Employer

Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 6 / 2 0 0 7

Transaction ID: AD1E9D68446CB4467885

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Mille Lacs Band of Ojibwe Indians

Mailing Address 43408 Oodeena Dr.

City State Zip Code  
 Onamia MN 56359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

**Transaction ID:** AF7540DBD7264418AA67

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Stockbridge-Munsee Community

Mailing Address P.O. Box 70

City State Zip Code  
 Bowler WI 54416

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 6 / 2 0 0 7

**Transaction ID:** A333D5C5B08BB4661A60

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Steamfitters Pipefitters 475 Pac

Mailing Address Po Box 4187

City State Zip Code  
 Warren NJ 07059

FEC ID number of contributing  
federal political committee.

**C**

c00252395

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

**Transaction ID:** A8D4E73482AA74D81B77

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Keep New Jersey Moving, Inc.

Mailing Address 20 Ridge Road

City State Zip Code  
 Mahwah NJ 07430

FEC ID number of contributing federal political committee.

C c00386854

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: A0921C2FF52124CAABE0

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Kidney Care Council Inc. PAC

Mailing Address 950 F Street NW  
8th Floor

City State Zip Code  
 Washington DC 20004-1404

FEC ID number of contributing federal political committee.

C c00326736

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 8 / 2 0 0 7

Transaction ID: AE11EC66BFAAE4AE484E

Amount of Each Receipt this Period

905.00

In-kind: Food/Bev. for Fundraiser

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Choctaw Nation Of Oklahoma

Mailing Address P.O. Drawer 1210

City State Zip Code  
 Durant OK 74702

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: AAC2E1D10D4D94EA5998

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

2905.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Watson Pharmaceuticals Pac

Mailing Address 311 Bonnie Circle

City State Zip Code  
 Corona CA 92880

FEC ID number of contributing  
federal political committee. **C** c00391086

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: ADF0415E1CC2B4A5AACB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Eastern Band of Cherokee

Mailing Address P.O. Box 455

City State Zip Code  
 Cherokee NC 28719

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

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: A13CD04FEADDD4C41AF8

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Natl Emergency Med. Pac

Mailing Address Po Box 619911

City State Zip Code  
 Dallas TX 75261

FEC ID number of contributing  
federal political committee. **C** c00140061

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: AF184A3FDE14248C59BD

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Kidney Care Council Inc. PAC Mailing Address 950 F Street NW 8th Floor City Washington State DC Zip Code 20004-1404 FEC ID number of contributing federal political committee. <b>C</b> c00326736 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3405.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> AD9DF69FDF1E6451D8DE Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Psychology Assn Mailing Address PO Box 38129 City Colorado Springs State CO Zip Code 80937 FEC ID number of contributing federal political committee. <b>C</b> c00002956 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> A9FA7D7AF9A004949B95 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Drinker Biddle PAC Mailing Address 1500 K Street NW Suite 1100 City Washinton State NJ Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> c00370759 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 <b>Transaction ID:</b> AC8B21F8083C24B5AA94 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Oneida Tribe of Indians of Wisconsin

Mailing Address PO Box 365

City State Zip Code  
 Oneida WI 54155

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: AE0504863205E47B4AF2

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Tohono OOdham Nation

Mailing Address PO Box 837

City State Zip Code  
 Sells AZ 85634

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 0 7

Transaction ID: A83562ED7607A4F79B54

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Philips Electronics No. Amer. Pac

Mailing Address 1300 I St. NW

City State Zip Code  
 Washignton DC 20005

FEC ID number of contributing  
federal political committee.

**C** c00239780

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2042.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 6 / 2 0 0 7

Transaction ID: A4380FD999FB94796834

Amount of Each Receipt this Period

2042.88

In-kind: Food/Bev. for Fun-  
draiser

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5042.88

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

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

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

FOR LINE NUMBER: PAGE 79 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Natl Assn. Of Insurance & Financial Adv

Mailing Address Po Box 12012

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** c00005249

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 7 / 2 0 0 7

Transaction ID: A0D3E75988DC341DAA15

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Jempac

Mailing Address 2 Princess Rd.

City State Zip Code  
Lawrenceville NJ 08648

FEC ID number of contributing federal political committee. **C** c00039123

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: A3EC8EA02E03C44879F8

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

American Association of Clinical Endocrinologists

Mailing Address 245 Riverside Avenue

City State Zip Code  
Jacksonville FL 32202

FEC ID number of contributing federal political committee. **C** c00368365

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 8 / 2 0 0 7

Transaction ID: A601F17B3D47E4C03939

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Sonosite Inc-PAC

Mailing Address 21919 30th Dr. SE

City State Zip Code  
 Bothell WA 98021

FEC ID number of contributing federal political committee.

C c00404251

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: A7D7C3648E07D44D9BD7

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Asbestos Workers Pac

Mailing Address 9602 Martin Luther King Hwy

City State Zip Code  
 Lanham MD 20706

FEC ID number of contributing federal political committee.

C c00115527

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: A79F3585E593F42539BA

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Cardiology Advocacy Alliance

Mailing Address 11065 Home Shore Dr.

City State Zip Code  
 Pinckney MI 48169

FEC ID number of contributing federal political committee.

C c00421040

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: A303AE366F4674460B2E

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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



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

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

FOR LINE NUMBER: PAGE 81 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. American Association of Clinical Endocrinologists

Mailing Address 245 Riverside Avenue

City State Zip Code  
Jacksonville FL 32202

FEC ID number of contributing federal political committee.

C c00368365

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2007

Transaction ID: AAF4040FE1C4B4DA88EF

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Spokane Tribe

Mailing Address P.O. Box 100

City State Zip Code  
Wellinit WA 99040

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2007

Transaction ID: A5FB80119359A4AD8892

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. National Electrical Manufacturers Association

Mailing Address 1300 North 17th Street Suite 1847

City State Zip Code  
Rosslyn VA 22209-3801

FEC ID number of contributing federal political committee.

C c00331173

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2007

Transaction ID: AAA448BD07A084FE99F6

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.**

Full Name (Last, First, Middle Initial)

Natl Funeral Directors Assn. Pac

Mailing Address 13625 Bishop's Dr.

City State Zip Code  
 Brookfield WI 53005

FEC ID number of contributing federal political committee.

**C** c00204008

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 0 7

Transaction ID: A7E60B00A9EF54D9783A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Local 68 Engineers Pac

Mailing Address 11 Fairfield Pl.

City State Zip Code  
 West Caldwell NJ 07006

FEC ID number of contributing federal political committee.

**C** c00138966

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 3 / 2 0 0 7

Transaction ID: AEEEC33B29A7F487D9E4

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Comcast Corp. Pac

Mailing Address 1500 Market St.

City State Zip Code  
 Philadelphia PA 19102

FEC ID number of contributing federal political committee.

**C** c00138966

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 3 / 2 0 0 7

Transaction ID: A4A1D28344FCD4550BCC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Natl Emergency Med. Pac

Mailing Address Po Box 619911

City State Zip Code  
 Dallas TX 75261

FEC ID number of contributing federal political committee.

C c00140061

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 4 / 2 0 0 7

Transaction ID: A6B9F04D1CBE04517A93

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

UAW V Cap

Mailing Address 8000 E. Jefferson St.

City State Zip Code  
 Detroit MI 48214

FEC ID number of contributing federal political committee.

C c00002840

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 4 / 2 0 0 7

Transaction ID: A91309D783B7D4E1C8C0

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

Baxter Healthcare

Mailing Address 800 Connecticut Ave NW  
Suite 1100

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing federal political committee.

C c00117838

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 7

Transaction ID: A2A3FC075EB794371983

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Medco Health Pac Mailing Address 591 Redwood Hwy. Bldg. 4000 City Mill Valley State CA Zip Code 94941 FEC ID number of contributing federal political committee. <b>C</b> c00384362 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A9A0A26671C854E63807 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Generic Pharmaceutical Pac Mailing Address 2300 Clarendon Blvd. #400 City Arlington State VA Zip Code 22201 FEC ID number of contributing federal political committee. <b>C</b> c00383463 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A51B947DF32D045BABDA Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Nat'l Auto Dealers Elec. Action Mailing Address 8400 Westpark Dr. City Mclean State VA Zip Code 22102 FEC ID number of contributing federal political committee. <b>C</b> c00040998 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A4CAB6D213E194330A6C Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 85 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. American Association for Justice

Mailing Address 1050 31st St. NW

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing federal political committee.

C c00024521

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: AD56969C2677949EDB33

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Directv Pac

Mailing Address 444 N. Capitol St. Nw #728

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing federal political committee.

C c00331991

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: AAC4189328F8742AE9CD

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Natl Beer Wholesalers Assn. Pac

Mailing Address 1101 King St. #600

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing federal political committee.

C c00144766

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: A45FD95C593334DF2970

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Usinpac Mailing Address Po Box 222424 City Chantilly State VA Zip Code 20153 FEC ID number of contributing federal political committee. <b>C</b> c00381699 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A51E6DCC5FB014935B60 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Genesis Health Ventures Pac Mailing Address 101 E. State St. City Kennett Sq. State PA Zip Code 19348 FEC ID number of contributing federal political committee. <b>C</b> c00292094 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> A0ACA207B09ED41B5B25 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Time Warner Pac Mailing Address 800 Conn. Ave. Nw #1200 City Washington State DC Zip Code 20006 FEC ID number of contributing federal political committee. <b>C</b> c00339291 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 <b>Transaction ID:</b> AF046BFAB7B6F4BEB9BB Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer Hospital Assn. Pac

Mailing Address 325 7th St. Nw

City State Zip Code  
Washington DC 20004
FEC ID number of contributing  
federal political committee.**C** c00106146

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

Transaction ID: A51AFAA2DE6E14E0BA70

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Society For Vascular Surg.pac

Mailing Address 633 N. St. Clair St. 24th Fl.

City State Zip Code  
Chicago IL 60611
FEC ID number of contributing  
federal political committee.**C** c00381459

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

Transaction ID: A4766C4D09C8941AE87F

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Amer Health Care Assn. Pac

Mailing Address 1201 L St. Nw

City State Zip Code  
Washington DC 20005
FEC ID number of contributing  
federal political committee.**C** c00006080

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

Transaction ID: ADEA3DAD71CD94017BB3

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 88 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Mailing Address 2000 K Street  
Suite 500

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** c00021295

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

**Transaction ID:** A1421B74E07E44B8FABC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Us Oncology Inc. Good Govt Cmte.

Mailing Address 16825 Northchase Drive #1300

City State Zip Code  
Houston TX 77060

FEC ID number of contributing  
federal political committee.

**C** c00339655

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

**Transaction ID:** A38B7A7ACE04B4D3CA91

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Institute Of Scrap Recycling Ind. Pac

Mailing Address 1325 G St. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** c00046086

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 0 7

**Transaction ID:** A8555AB5A3642469BA3C

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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



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

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

FOR LINE NUMBER: PAGE 89 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Natl Comm. Pharmacists Pac

Mailing Address 100 Daingerfield Rd.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** c00030809

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

**Transaction ID:** ADDDCBCE9B9D463CB3A

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** American Surgical Hospital Association

Mailing Address 910 East 20th St.

City State Zip Code  
 Sioux Falls SD 57105

FEC ID number of contributing  
federal political committee.

**C** c00394163

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

**Transaction ID:** A8693DAD7FABC4EA1867

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Natl Assn. Of Insurance & Financial Adv

Mailing Address Po Box 12012

City State Zip Code  
 Falls Church VA 22042

FEC ID number of contributing  
federal political committee.

**C** c00005249

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

**Transaction ID:** ADA01A4467A6048B4AD2

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

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

FOR LINE NUMBER: PAGE 90 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Recreational Fishing Alliance Pac

Mailing Address Po Box 3080

City State Zip Code  
 New Gretna NJ 08224

FEC ID number of contributing  
federal political committee.

**C** c00363812

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: A63CA199713AF4155868

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Siemens Corp Pac

Mailing Address 601 Penn. Ave. No. Bldg 1100

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** c00353797

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: AC6F75F96E11640FAB4C

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Natl Cmte To Preserve Ss & Medicare Pac

Mailing Address 10 G St. Ne

City State Zip Code  
 Washington DC 20002

FEC ID number of contributing  
federal political committee.

**C** c00172296

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 6 / 2 0 0 7

Transaction ID: A7DF965C893F646F7972

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Weston Pac

Mailing Address 1001 Conn. Ave. Nw #1200

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** c00251843

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 0 7

**Transaction ID:** A2DC5226D74F34E3D973

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Ent Pac

Mailing Address One Prince St.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** c00306449

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 0 7

**Transaction ID:** A60AEDFFD911E43BA849

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Society Of Thoracic Surgeons Pac

Mailing Address 1025 Conn. Ave. Nw #1104

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** c00325936

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 0 7

**Transaction ID:** AD4031B5A34BA41AFB0C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 92 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Active Ballot Club

Mailing Address 1775 K St. NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C** c00002766

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

**Transaction ID:** AA8D2CB009AFE49F9AE8

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Akin Gump Strauss Hauer Feld

Mailing Address 1333 New Hampshire Ave. NW #400

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C** c00104901

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

**Transaction ID:** A27A377A9B5AF4B27AAD

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Natl Air Traffic Controllers Assn. Pac

Mailing Address 1325 Mass. Ave. NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** c00238725

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 7

**Transaction ID:** ABF09364C7D0D481A8C1

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4250.00

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

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

Use separate schedule(s)  
or each category of the  
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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Fresenius Medical Care North America

Mailing Address 1875 Eye Street NW  
12th Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** c00401299

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** A8C9EFC1BBC49484E89A

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Cerner Corporation

Mailing Address 2800 Rockcreek Pkwy

City State Zip Code  
Kansas City MO 64117

FEC ID number of contributing  
federal political committee.

**C** c00410589

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** AEF9A0CB175634836A65

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Viejas Tribal Government

Mailing Address 1 Viejas Grade Road

City State Zip Code  
Alpine CA 91901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** A65E568E81BF944DCAAB

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5300.00

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

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

Use separate schedule(s)  
or each category of the  
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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ortho Pac Mailing Address 317 Mass. Ave. Ne City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. <b>C</b> c00343137 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> A9602457FB0A446F5939 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Davita Inc. Mailing Address 21250 Hawthorne Blvd. STE 800 City Torrance State CA Zip Code 90503 FEC ID number of contributing federal political committee. <b>C</b> c00340943 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> A2C979BE6E09C49B4AB3 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Amer Nurses Assn. Pac Mailing Address 8515 Georgia Ave. #400 City Silver Spring State MD Zip Code 20910 FEC ID number of contributing federal political committee. <b>C</b> c00017525 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7 <b>Transaction ID:</b> AA8FE84EE30364C54849 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer Chiropractic Assn. Pac

Mailing Address 1701 Clarendon Blvd.

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing  
federal political committee.

**C** c00102764

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** AAED24B3EA05343A994E

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Aflac Inc. Pac

Mailing Address 1932 Wynnton Rd.

City State Zip Code  
Columbus GA 31999

FEC ID number of contributing  
federal political committee.

**C** c00034157

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** A7843D6271D7644E9B6D

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** General Electric Co. PAC

Mailing Address 1299 Penn Ave. NW #1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** c00024869

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 7

**Transaction ID:** A636190FC7CE74171B67

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer Optometric Pac

Mailing Address 1505 Prince St.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee. **C** c00024968

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 2 / 2 0 0 7

**Transaction ID:** AAB1FC7D0E246415E8CA

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Physical Therapy Pac

Mailing Address 1111 No. Fairfax St.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee. **C** c00012880

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 7

**Transaction ID:** AD09C54BE0A154612B56

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Transport Workers Union Pac

Mailing Address 1700 Broadway 2nd Fl.

City State Zip Code  
 New York NY 10019

FEC ID number of contributing  
federal political committee. **C** c00008268

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 7

**Transaction ID:** A09C3C667C8FA4EB9853

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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



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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. College Of Amer. Pathologists Pac

Mailing Address 1350 I St. NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C c00274944

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: A129592D5CD3C40C2B62

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Amer Veterinary Medical Assoc. Pac

Mailing Address 1910 Sunderland Place NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C c00114132

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: A0CF7CD472F0546A1AEE

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Amer Soc. Of Anesthesiologists Pac

Mailing Address 520 N. Northwest Hwy.

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C c00255752

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 7

Transaction ID: A62B5EDB2B644467D832

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** American Association of Bioanalysts

Mailing Address 906 Olive St.  
Suite 1200

City State Zip Code  
St. Louis MO 63101

FEC ID number of contributing  
federal political committee.

**C** c00249581

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

**Transaction ID:** A446B8F548F3C472FABF

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** First Energy Pac

Mailing Address 76 S. Main St.

City State Zip Code  
Akron OH 44308

FEC ID number of contributing  
federal political committee.

**C** c00140855

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

**Transaction ID:** A8DB13E64EF0642BDAFC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Laboratory Corporation of America Holdings

Mailing Address P.O. Box 2230

City State Zip Code  
Burlington NC 27216

FEC ID number of contributing  
federal political committee.

**C** c00314997

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 6 / 2 0 0 7

**Transaction ID:** A96C2BD0A36D04FA5A5A

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

A. Akerman Senterfitt &amp; Eidson P.A.

Mailing Address P.O. Box 231

City State Zip Code  
 Orlando FL 32802

FEC ID number of contributing federal political committee.

C c00280008

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: A833F8068C99D4F2B8BC

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Clinical Laboratory Management Assn.

Mailing Address 989 Old Eagle School Rd.  
#815

City State Zip Code  
 Wayne PA 19087

FEC ID number of contributing federal political committee.

C c00381152

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: A20ABF87D636C4A3091A

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Quest Diagnostics Pac

Mailing Address 815 Conn. Ave. Nw #330

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing federal political committee.

C c00329185

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: A0E3D8D5BEA204991922

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

5000.00

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

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

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer College Of Cardiology Pac

Mailing Address 2400 N St. Nw 7th Fl

City State Zip Code  
 Washington DC 20037

FEC ID number of contributing  
federal political committee. **C** c00375360

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: A4D32256F07154C40B17

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Realtors Pac

Mailing Address 430 N. Michigan Ave.

City State Zip Code  
 Chicago IL 60611

FEC ID number of contributing  
federal political committee. **C** c00030718

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: AB26E94B2E8FF412180A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Amer. Clinical Laboratory Assn. Pac

Mailing Address 1250 H St. Nw #880

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** c00410084

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

Transaction ID: AF943765B12614396991

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Society Of Thoracic Surgeons Pac

Mailing Address 1025 Conn. Ave. Nw #1104

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** c00325936

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

**Transaction ID:** A5D3D560453E24B3687E

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Amer Soc. For Clinical Lab. Science Pac

Mailing Address 7910 Woodmont Ave. #530

City State Zip Code  
 Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C** c00034645

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 6 / 2 0 0 7

**Transaction ID:** A66DA1737115348A2B20

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Mohegan Tribe

Mailing Address 5 Crow Hill Rd. PO Box 488

City State Zip Code  
 Uncasville CT 06382

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

**Transaction ID:** A542CB8C43DD54A6FA97

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6800.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
 Ironworkers Pol. Action League  
 Mailing Address 1750 New York Ave. NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** c00027359

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A48214398D30C4EF8B82

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Brod Of Locomotive Engrs Pac  
 Mailing Address 1370 Ontario St.

City State Zip Code  
 Cleveland OH 44113

FEC ID number of contributing  
federal political committee. **C** c00099234

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A8CF8DB3FAC874CE8922

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 American Academy of Sleep Medicine  
 Mailing Address One Westbrook Corporate Center  
 Suite 920

City State Zip Code  
 Westchester IL 60154

FEC ID number of contributing  
federal political committee. **C** c00331462

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: AC382FE44E2164322806

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 103 / 158

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** American Dental Pac

Mailing Address 1111 14th St. NW

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** c00000729

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: AA79FDBA882534ABF8DE

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Us Cuba Democracy Pac

Mailing Address 1200 W 49th St.

City State Zip Code  
 Hialeah FL 33012

FEC ID number of contributing  
federal political committee.

**C** c00387720

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A7E388AB7DB524028929

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Air Line Pilots Assn. Pac

Mailing Address 1625 Mass. Ave. NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** c00035451

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

Transaction ID: A3C83AF52383E441D9F4

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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

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

Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Amer Road & Transp. Bldrs Assn. Pac

Mailing Address 1219 28th St. Nw

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C** c00118208

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

**Transaction ID:** AC5723F9A64EB40749C3

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Usinpac

Mailing Address Po Box 222424

City State Zip Code  
 Chantilly VA 20153

FEC ID number of contributing  
federal political committee.

**C** c00381699

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 7

**Transaction ID:** AF9503F3C0EDC448D8A9

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Natl Multi Housing Council Pac

Mailing Address 1850 M St. Nw

City State Zip Code  
 Washignton DC 20036

FEC ID number of contributing  
federal political committee.

**C** c00130773

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A9B74AD99920340CBAC2

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

2000.00

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



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

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** American College of Radiology Association

Mailing Address 1891 Preston White Drive

City State Zip Code  
 Reston VA 20191

FEC ID number of contributing  
federal political committee.

**C** c00343459

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A4AF4D1076E6D46A5ACE

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Natl Assn. Of Retired Fed. Wrks Pac

Mailing Address 606 N. Washington St.

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** c00091561

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

**Transaction ID:** AD1918AF0FDB642E69C6

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Ophthpac

Mailing Address 1101 Vermont Ave. NW

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** c00196246

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

**Transaction ID:** A47C9C6A0B13540DEA4F

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

6000.00

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

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Oral & Maxillofacial Surgery Pac

Mailing Address 9700 W. Bryn Mawr Ave.

City State Zip Code  
 Rosemont IL 60018

FEC ID number of contributing  
federal political committee. **C** c00005660

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A2856C21520E64A2F94C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Petroleum Massn Small Bus.

Mailing Address 1901 North Fort Myer Dr. #1200

City State Zip Code  
 Arlington VA 22209

FEC ID number of contributing  
federal political committee. **C** c00035204

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A89A96CA6A12C456B94B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Renal Physicians Association

Mailing Address 1700 Rockville Pike  
 Suite 220

City State Zip Code  
 Rockville MD 20852

FEC ID number of contributing  
federal political committee. **C** c00409391

Name of Employer Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 0 / 2 0 0 7

Transaction ID: A3DA4F724D9D3465682B

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ups Pac  
Mailing Address 55 Glenlake Parkway Ne

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** c00064766

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: AC01A658B6C03444899C

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AMGEN  
Mailing Address One Amgen Center Drive

City State Zip Code  
Thousand Oaks CA 91320

FEC ID number of contributing federal political committee. **C** c00251876

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A0B3AA941A92F4779913

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Amer Optometric Pac  
Mailing Address 1505 Prince St.

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** c00024968

Name of Employer Occupation

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A42A5E6A95E574A20B50

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

5500.00

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

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

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

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

Mashantucket Pequot Tribal Nation

Mailing Address PO Box 3008

City State Zip Code  
Mashantucket CT 06339-3008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A4FD40E285647420192E

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Seiu Cope Us Division

Mailing Address 1313 L St. Nw

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C**

c00004036

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: AD443F79896BF42DC961

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

Exelonpac

Mailing Address Po Box 805379

City State Zip Code  
Chicago IL 60680

FEC ID number of contributing  
federal political committee.

**C**

c00141218

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 7

Transaction ID: A5140DB94532E421EB60

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

7000.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Public Service Enterprise Pac

Mailing Address 80 Park Plaza

City	State	Zip Code
Newark	NJ	07102

FEC ID number of contributing  
federal political committee.**C** c00383489

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	7

Transaction ID: A29965B7DF514414DB8C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Amer Occupational Therapy Assn. Pac

Mailing Address Po Box 31220

City	State	Zip Code
Bethesda	MD	20824

FEC ID number of contributing  
federal political committee.**C** c00089086

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	7

Transaction ID: AB043600B92B64BC083C

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Society of Interventional Pain Management

Mailing Address 2831 Lone Oak Road

City	State	Zip Code
Paducah	KY	42003

FEC ID number of contributing  
federal political committee.**C** c00416628

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	7

Transaction ID: A5AB86B7A5C3245DCB03

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Pallone for Congress

A. Full Name (Last, First, Middle Initial)  
Amer Soc. Interventional Pain Physician

Mailing Address 2831 Lone Oak Rd.

City State Zip Code  
Paducah KY 32003

FEC ID number of contributing  
federal political committee.

**C** c00351197

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2007

Transaction ID: A842F61F3C4CA4342BEC

Amount of Each Receipt this Period

4000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

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

4000.00

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

182597.88

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

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

FOR LINE NUMBER: PAGE 111 / 158

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bank Of America Mailing Address 577 Broadway City State Zip Code Long Branch NJ 07740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 20144.04		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> A4450D095C8F04FC1A4C Amount of Each Receipt this Period 6506.13 Interest <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Bank Of America Mailing Address 577 Broadway City State Zip Code Long Branch NJ 07740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 25816.39		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7 <b>Transaction ID:</b> A8A31E8D340B14152A23 Amount of Each Receipt this Period 5672.35 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bank Of America Mailing Address 577 Broadway City State Zip Code Long Branch NJ 07740 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 32271.76		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 <b>Transaction ID:</b> AF38B4557DC434468846 Amount of Each Receipt this Period 6455.37 Interest <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		18633.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		18633.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Kidney Care Council Inc. PAC**

Mailing Address 950 F Street NW  
8th Floor

City Washington State DC Zip Code 20004-1404

Purpose of Disbursement  
In-kind: Food/Bev. for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE11EC66BFAAE4AE484E

Date of Disbursement

/   /

Amount of Each Disbursement this Period

905.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Philips Electronics No. Amer. Pac**

Mailing Address 1300 I St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
In-kind: Food/Bev. for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4380FD999FB94796834

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2042.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Chira, Llc**

Mailing Address 610 Joline Ave.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Storage Unit

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B8E554F01E61142C5A10

Date of Disbursement

/   /

Amount of Each Disbursement this Period

187.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

3135.13

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



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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Bank Of America**

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement

Merchant Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD80E9F42A6684FBE8AB

Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Matthew B. Montekio**

Mailing Address 118 Flintlock Dr

City Lakewood State NJ Zip Code 08701-4119

Purpose of Disbursement

Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B38977D4792034234BA8

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1385.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Bruce W. Woolley**

Mailing Address PO Box 4088

City Long Branch State NJ Zip Code 07740-4088

Purpose of Disbursement

Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B7ECA3E635C924461887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2650.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

4068.22

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

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

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Marilyn Regan

Mailing Address 41 Werah Place

City Oceanport State NJ Zip Code 07757-1533

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BAFAB89D92BFB45E9B8B

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Cash

Mailing Address 495 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Replenish Petty Cash

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9DE854BA8D1044BD879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** American Express

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Collection Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BE5ABEC7701E14E0B81C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

2005.62

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Bonus Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B2C6929F5A2C547A0968</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Marilyn Regan</b> Full Name (Last, First, Middle Initial) Mailing Address 41 Werah Place City Oceanport State NJ Zip Code 07757-1533 Purpose of Disbursement Bonus Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B4623B7F74ECB42F7A57</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Konica Business Technology</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 41601 City Philadelphia State PA Zip Code 19101 Purpose of Disbursement Copier Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BB1196A64BC3F49CB8D0</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 289.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**4289.22**

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

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

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

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Pallone for Congress

<b>A. Verizon</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 4833 City Trenton State NJ Zip Code 08650 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B238BE5095BF5466C94B</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 7 Amount of Each Disbursement this Period 869.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Bank Of America</b> Full Name (Last, First, Middle Initial) Mailing Address 577 Broadway City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Federal Deposit 941 - December Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BAE380CCF9A3848C9B89</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 2902.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Formex, Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 620 Broadway City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Letter Head Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B86F436E90CFA49B48D6</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 Amount of Each Disbursement this Period 290.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**4062.67**

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Royal Printing Service**

Mailing Address Po Box 1000

City W. New York State NJ Zip Code 07093

Purpose of Disbursement  
Christmas Cards

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B691CEED7C1C54CBAA45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	7

Amount of Each Disbursement this Period

6648.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address P.O. Box 4833

City Albany State NY Zip Code 12212

Purpose of Disbursement  
Cell Phone

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B753E4B45701743DC8A3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	7

Amount of Each Disbursement this Period

177.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. South Amboy St. Patricks Day Parade**

Mailing Address 421 Conover St.

City South Amboy State NJ Zip Code 08878

Purpose of Disbursement  
Sponsorship

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B3CABE6DEF9B3492F982

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	7

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

7076.01

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Marilyn Regan</b> Full Name (Last, First, Middle Initial) Mailing Address 41 Werah Place City Oceanport State NJ Zip Code 07757-1533 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B20F7E02B639942E3B82 <b>Date of Disbursement</b> <div> <div>01</div> <div>16</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>1700.62</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B9E859B1B9F6A44109CF <b>Date of Disbursement</b> <div> <div>01</div> <div>16</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>1385.72</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Aristotle Int'l Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 200 Penn. Ave. SE City Washington State DC Zip Code 20003 Purpose of Disbursement Data Base Equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> BC8C461ACAF7C4A2DA8C <b>Date of Disbursement</b> <div> <div>01</div> <div>18</div> <div>2007</div> </div> Amount of Each Disbursement this Period <div>1800.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**4886.34**

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) State Of New Jersey Nj-927 Mailing Address Po Box 632 City Trenton State NJ Zip Code 08846 Purpose of Disbursement 4th Quarter Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> BE274EE2CB9F34981978 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 3 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>816.72</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Ranney School Parents Assoc. Mailing Address 235 Hope Rd. City Tinton Falls State NJ Zip Code 07724 Purpose of Disbursement Ad & Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B3A0F4DAC61BD4A8E8E8 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 3 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>1500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express Mailing Address Po Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement Deliveries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> BC80258C43A494654B23 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 4 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>54.37</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**2371.09**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

**A.** Full Name (Last, First, Middle Initial)  
Horizon Bc/bs Of Nj

Mailing Address Po Box 1738

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Health Insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B74AC2E9657744678856

Date of Disbursement

/   /

Amount of Each Disbursement this Period

394.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

Mailing Address Po Box 94081

City Palatine State IL Zip Code 60094

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BED79D87C9B3B491BBDC

Date of Disbursement

/   /

Amount of Each Disbursement this Period

145.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

Mailing Address Po Box 840

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
TV Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B94EE9581C2D74999B68

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

620.43

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Bruce W. Woolley</b>		<b>Transaction ID:</b> BDB1A6CA9D7944929961 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address PO Box 4088		<b>Amount of Each Disbursement this Period</b> <div>2400.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Long Branch	State NJ		Zip Code 07740-4088
Purpose of Disbursement Rent			<input type="checkbox"/> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Matthew B. Montekio</b>		<b>Transaction ID:</b> BF7939530CBF24A15836 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div>	
Mailing Address 118 Flintlock Dr		<b>Amount of Each Disbursement this Period</b> <div>1385.72</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Lakewood	State NJ		Zip Code 08701-4119
Purpose of Disbursement Salary			<input type="checkbox"/> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Marilyn Regan</b>		<b>Transaction ID:</b> B1FE031E815284260A0B <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div>	
Mailing Address 41 Werah Place		<b>Amount of Each Disbursement this Period</b> <div>1700.62</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Oceanport	State NJ		Zip Code 07757-1533
Purpose of Disbursement Salary			<input type="checkbox"/> Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

**5486.34**

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

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

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

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Chira, Llc

Mailing Address 610 Joline Ave.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement

Storage Unit

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA6A1D35BDB9E4A40BF4

Date of Disbursement

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

Amount of Each Disbursement this Period

187.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Bank Of America

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement

Merchant Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B18DA84CBC21D4982BBA

Date of Disbursement

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

Amount of Each Disbursement this Period

82.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** American Express

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement

Credit Card Collection Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA9C9DF1A385B40449F8

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	5	/	2	0	0	7

Amount of Each Disbursement this Period

5.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

275.70

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Verizon</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 4833 City Trenton State NJ Zip Code 08650 Purpose of Disbursement Telephone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B3F6707295A6049C0B82 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>874.49</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	7	874.49
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	8		2	0	0	7														
874.49																							
<b>B. Konica Business Technology</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 41601 City Philadelphia State PA Zip Code 19101 Purpose of Disbursement Copier Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B8464155C940B47E9A9A <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>289.22</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	7	289.22
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	8		2	0	0	7														
289.22																							
<b>C. Verizon Wireless</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 4833 City Albany State NY Zip Code 12212 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B9C0F6397ABB642E6852 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>180.63</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	7	180.63
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	8		2	0	0	7														
180.63																							

**SUBTOTAL** of Disbursements This Page (optional) .....**1344.34****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Marilyn Regan</b> Full Name (Last, First, Middle Initial) Mailing Address 41 Werah Place City Oceanport State NJ Zip Code 07757-1533 Purpose of Disbursement Reimbursement for photos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B0D26263249EE4019889</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 64.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Tabernacle Baptist Church</b> Full Name (Last, First, Middle Initial) Mailing Address 675 So. 20th St. City Newark State NJ Zip Code 07103 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B2A1EA9314D064ECA96F</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. A.c.n. Graphics</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 1598 City Wall State NJ Zip Code 07719 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BFC9C7218B0C34B818F3</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 1273.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**1837.50**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Marilyn Regan</b> Full Name (Last, First, Middle Initial) Mailing Address 41 Werah Place City Oceanport State NJ Zip Code 07757-1533 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B76D3AC64B9B14A06859</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 1700.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Cell Phone Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BD952A028B62C4F3EA91</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BACC298F9E186479BB4A</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 1385.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**3206.34**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John E. Wade Retirement Dinner		<b>Transaction ID:</b> B02521A9E5A2148D1B81 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 462 Market St.		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>300.00</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Perth Amboy State NJ Zip Code 08861	<b>Category/Type</b> <div> <div></div> </div>	
Purpose of Disbursement Plaque Sponsorship		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Comcast		<b>Transaction ID:</b> B67F258FF2E8F4A21971 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 0 7</div> </div>
Mailing Address Po Box 840		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>80.70</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Newark State NJ Zip Code 07101	<b>Category/Type</b> <div> <div></div> </div>	
Purpose of Disbursement TV Service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Quill Corp.		<b>Transaction ID:</b> B602FA936A032418E8B8 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 2 / 2 0 0 7</div> </div>
Mailing Address Po Box 94081		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>567.44</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Palatine State IL Zip Code 60094	<b>Category/Type</b> <div> <div></div> </div>	
Purpose of Disbursement Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**948.14**

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Horizon Bc/bs Of Nj

Mailing Address Po Box 1738

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Health Insurance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B8A1A69C2DCA8430CA48

Date of Disbursement

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

Amount of Each Disbursement this Period

394.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Premiere Global Service

Mailing Address 1268 Paysphere Circle

City Chicago State IL Zip Code 60674

Purpose of Disbursement  
Blast Fax Service

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BEB61C6787E95458D921

Date of Disbursement

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

Amount of Each Disbursement this Period

228.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Garden State Equality

Mailing Address 67 Church St.

City Montclair State NJ Zip Code 07040

Purpose of Disbursement  
AD

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B53BA79B11ECF47F6A5D

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	7

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

872.75

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Mcloone's Pier House**

Mailing Address 1 Ocean Ave.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Deposit for Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B61E1EF7622F74E03875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Cash**

Mailing Address 495 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Replenish Petty Cash

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B55C60B1E52B64B49B21

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Marilyn Regan**

Mailing Address 41 Werah Place

City Oceanport State NJ Zip Code 07757-1533

Purpose of Disbursement  
Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B381E3944ABF747068DE

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1700.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

2400.62

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



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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B630BAC8E3ED84125B86</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 1385.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Bruce W. Woolley</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 4088 City Long Branch State NJ Zip Code 07740-4088 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BB615515B00B94A88A45</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 2400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Chira, Llc</b> Full Name (Last, First, Middle Initial) Mailing Address 610 Joline Ave. City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Storage Unit Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: BAF925622582147738CB</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 187.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**3972.97**

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card Collection Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA00CDFDC959B43EFB2D

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Cavarocchi Ruscio Dennis Co.**

Mailing Address 316 Mass. Ave. Se

City Washignton State DC Zip Code 20002

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BE8DC9D7FD6144CA48BD

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Bank Of America**

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Merchant Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B1EC0F8C2222F41D9969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

288.45

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Bank Of America**

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement

Check order Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA7FB691F60EC469F9E4

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

4.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Cavarocchi Ruscio Dennis Co.**

Mailing Address 316 Mass. Ave. Se

City Washignton State DC Zip Code 20002

Purpose of Disbursement

Monthly Phone Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B71B664F51FB14B5F935

Date of Disbursement

03 / 08 / 2007

Amount of Each Disbursement this Period

273.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Chase Card Services**

Mailing Address P.O. Box 15153

City Wilmington State NJ Zip Code 19886

Purpose of Disbursement

Democratic Caucus Retreat

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD460E7B39D3045CDA61

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

744.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

1021.33

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** American Heart Assn.

Mailing Address 1 Union St. #301

City Robbinsville State NJ Zip Code 08691

Purpose of Disbursement  
Full Page AD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B5C138B274C11449FA82

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address Po Box 4833

City Trenton State NJ Zip Code 08650

Purpose of Disbursement  
Telephone Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFC0B4DF7F877456AAC9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

861.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Verizon Wireless

Mailing Address P.O. Box 4833

City Albany State NY Zip Code 12212

Purpose of Disbursement  
Cell Phone

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B4E01E7718E274110A93

Date of Disbursement

/   /

Amount of Each Disbursement this Period

187.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

1548.45

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Konica Business Technology</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 41601 City Philadelphia State PA Zip Code 19101 Purpose of Disbursement Copier Lease Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		<b>Transaction ID:</b> BF10C7A50F09E447FA79 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 289.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B. Matthew B. Montekio</b> Full Name (Last, First, Middle Initial) Mailing Address 118 Flintlock Dr City Lakewood State NJ Zip Code 08701-4119 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		<b>Transaction ID:</b> BD7766E2F272444C5A74 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 1385.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Marilyn Regan</b> Full Name (Last, First, Middle Initial) Mailing Address 41 Werah Place City Oceanport State NJ Zip Code 07757-1533 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		<b>Transaction ID:</b> B2AF954D8535F4A99A48 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7 <b>Amount of Each Disbursement this Period</b> 1700.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>3375.56</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Tim McLoone		<b>Transaction ID:</b> B23166B7A48124461A6E <b>Date of Disbursement</b> <div> <div>03</div> <div>16</div> <div>2007</div> </div>	
Mailing Address 816 Ocean Ave			
City Sea Bright State NJ Zip Code 07760-2119			
Purpose of Disbursement Band for Fundraiser Candidate Name	Amount of Each Disbursement this Period <div>900.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Bank Of America		<b>Transaction ID:</b> B0A47BEDD7E1E4D1A920 <b>Date of Disbursement</b> <div> <div>03</div> <div>21</div> <div>2007</div> </div>	
Mailing Address 577 Broadway			
City Long Branch State NJ Zip Code 07740			
Purpose of Disbursement Fee Candidate Name	Amount of Each Disbursement this Period <div>5.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Horizon Bc/bs Of Nj		<b>Transaction ID:</b> B33A6A6D0FA7A4D479C6 <b>Date of Disbursement</b> <div> <div>03</div> <div>23</div> <div>2007</div> </div>	
Mailing Address Po Box 1738			
City Newark State NJ Zip Code 07101			
Purpose of Disbursement Health Insurance Candidate Name	Amount of Each Disbursement this Period <div>394.45</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1299.45</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Comcast**

Mailing Address Po Box 840

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
TV Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B9A76743A848E4E6ABAC

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.71

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
P.O. Box Annual Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BAABBE0C099DF4E88BCF

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card - See next 25 Items

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BB4EDAD1ACD6240B79C2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3723.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

3884.21

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BB2A7B941D2B04ACCB77

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Robins**

Mailing Address 624 Rt. 18 N

City E. Brunswick State NJ Zip Code 08816

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B3293574EFC96402C8A7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. New Jersey E-z Pass**

Mailing Address 375 McCarter Hwy.

City Newark State NJ Zip Code 07714

Purpose of Disbursement  
Auto Toll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BC69A556F4BE040D7952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

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

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



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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Kingsmill Resort**

Mailing Address 1010 Kingsmill Rd.

City Williamsburg State VA Zip Code 23185

Purpose of Disbursement  
Lodging for Democratic Caucus Retreat

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BBABAB155F7D64A0DBAD

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1675.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Kingsmill Resort**

Mailing Address 1010 Kingsmill Rd.

City Williamsburg State VA Zip Code 23185

Purpose of Disbursement  
Lodging for Democratic Caucus Retreat

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B3844A805F7F148EDAFF

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

950.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BB9945F9DA82D4A3292D

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

1.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Kingsmill Resort**

Mailing Address 1010 Kingsmill Rd.

City Williamsburg State VA Zip Code 23185

Purpose of Disbursement  
Lodging for Democratic Retreat

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B6F8EDBF19F2A4CDF99A

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	0	7

Amount of Each Disbursement this Period

26.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Exxon Mobile**

Mailing Address 590 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B829D695FB8944524A07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	7

Amount of Each Disbursement this Period

29.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B17F8D9D3C8DC4141BD2

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	0	7

Amount of Each Disbursement this Period

1.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BFB0B96F846DD4E77A5C

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	0	7

Amount of Each Disbursement this Period

2.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BB6A973822DB04CBCAE2

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	0	7

Amount of Each Disbursement this Period

3.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Stamps

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B476060FEE128450DAA0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	0	7

Amount of Each Disbursement this Period

117.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Sunoco Gas Station**

Mailing Address 1248 Penn Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B1A8F176610DE4BDA96B

Date of Disbursement

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

Amount of Each Disbursement this Period

33.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Paypal, Inc.**

Mailing Address Main St.

City San Jose State CA Zip Code 95101

Purpose of Disbursement  
Administrative Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BE896B285BD6A4EAFAFE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	7

Amount of Each Disbursement this Period

74.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B3CCE4B295FD7486EB02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	7

Amount of Each Disbursement this Period

1.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B12011952C1DE4F0289C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Lukoil**

Mailing Address 318 Durham Ave.

City S. Plainfield State NJ Zip Code 07080

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B10D40FBC7AB94F52BBD

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Royal Albert's Palace**

Mailing Address 1050 King George Road

City Fords State NJ Zip Code 08863

Purpose of Disbursement  
Food

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B06F55217AD2A4DBDA48

Date of Disbursement

/   /

Amount of Each Disbursement this Period

378.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Royal Regency Bar**

Mailing Address 1050 King George's Road

City State Zip Code  
Fords NJ 08863

Purpose of Disbursement  
Beverage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B1E6EC595727143C1BE7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

98.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Dunkin Donuts**

Mailing Address Broadway

City State Zip Code  
W. Long Branch NJ 07764

Purpose of Disbursement  
Food/Bev for meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B425C878AB46649339E7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Shop Rite Supermarket**

Mailing Address Hwy 36

City State Zip Code  
W. Long Branch NJ 07764

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B927A0572DF2B4DF4817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Headquarters Plaza**

Mailing Address 3 Head Quarters Plaza

City Morristown State NJ Zip Code 07960

Purpose of Disbursement  
Parking

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BE32DB3E641F9463D9D7

Date of Disbursement

02 / 24 / 2007

Amount of Each Disbursement this Period

7.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Lukoil**

Mailing Address 318 Durham Ave.

City S. Plainfield State NJ Zip Code 07080

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BFEB310AF476A4C06A5C

Date of Disbursement

02 / 24 / 2007

Amount of Each Disbursement this Period

28.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. New Jersey E-z Pass**

Mailing Address 375 Mccarter Hwy.

City Newark State NJ Zip Code 07714

Purpose of Disbursement  
Auto Tolls

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B33F2883E4B00436592E

Date of Disbursement

02 / 25 / 2007

Amount of Each Disbursement this Period

45.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A. Amtrak</b> Full Name (Last, First, Middle Initial) Mailing Address Union Station City Washington State DC Zip Code 20002 Purpose of Disbursement Train Ticket Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> BED1600D88D594CB89DE <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 77.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B. American Express</b> Full Name (Last, First, Middle Initial) Mailing Address Po Box 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card - See next 15 Items Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> BAD43188B06AA4342851 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Amount of Each Disbursement this Period 2539.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C. Lukoil</b> Full Name (Last, First, Middle Initial) Mailing Address Harding Hwy City Hamilton Twp. State NJ Zip Code 08618 Purpose of Disbursement Gasoline Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> B8557B5D3033F4A46B23 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 32.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

**2539.06**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Safeway Store**

Mailing Address 4203 Davenport St. NW

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BCBD2C510B02447F1993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

83.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Haute On The Hill**

Mailing Address B-339 H Rayburn Hob

City Washington State DC Zip Code 20515

Purpose of Disbursement  
Refreshments

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B85E63ECC10DF4886A48

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1067.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Foodtown Of West End**

Mailing Address 150 West End Ct.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BF76348BBC89C4F7E9E9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.66

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Costco Warehouse**

Mailing Address 1200 Fern St.

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA85E6B5EB0864836BE6

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	3		2	0	0	7

Amount of Each Disbursement this Period

79.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. New Jersey E-z Pass**

Mailing Address 375 McCarter Hwy.

City Newark State NJ Zip Code 07714

Purpose of Disbursement  
Auto Tolls

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B1EB3F54CB44A4F4DB66

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	0	7

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BA3075E428A394EF7889

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	5		2	0	0	7

Amount of Each Disbursement this Period

5.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BCB5AC490DF3C4125AF7

Date of Disbursement

01 / 10 / 2007

Amount of Each Disbursement this Period

84.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Montmarthre Restaurant**

Mailing Address 327 Seventh St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B60FBF085050F4D2A962

Date of Disbursement

01 / 11 / 2007

Amount of Each Disbursement this Period

153.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Paypal, Inc.**

Mailing Address Main St.

City San Jose State CA Zip Code 95101

Purpose of Disbursement  
Administrative Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BF0EF1C6DDDA44E5EA99

Date of Disbursement

01 / 18 / 2007

Amount of Each Disbursement this Period

74.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Quick Check Food Store**

Mailing Address 868 Broadway

City W. Long Branch State NJ Zip Code 07764

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B3F9E517BB7BC41D6BDC

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BDF0D716405874A0EBE7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

522.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Shell Station**

Mailing Address Main St.

City Ocean State NJ Zip Code 07712

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B320BE8EDD2614FD3A9F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. National Democratic Club**

Mailing Address 30 Ivy St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BC7DD29F2CF7D4226A46

Date of Disbursement

/   /

Amount of Each Disbursement this Period

275.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B54EEEE08560BB4CA8BC3

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1.11

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B64529AE3613C4636B63

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card See next 22 Items

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B349DB14316CB4926A79

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2694.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address Po Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Membership Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** B6DD2C6CCAF054834A5F

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Stamps

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BB2168B58B2A74D02AAC

Date of Disbursement

/   /

Amount of Each Disbursement this Period

117.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

2694.84

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

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Federal Express Corp.**

Mailing Address 200 Broadway

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Delivery

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BDAA30E7278DD4B69A17

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21.11

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Citigo**

Mailing Address 24 Hwy 35 South

City Eatontown State NJ Zip Code 07724

Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B996628F92B0C41D488C

Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Dunkin Donuts**

Mailing Address Broadway

City W. Long Branch State NJ Zip Code 07764

Purpose of Disbursement  
Food/Bev. for meeting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B44E1E7AB9631464ABD1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

29.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

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

0.00

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

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Exxon Mobile**

Mailing Address 220 Newman Springs Rd.

City State Zip Code  
Red Bank NJ 07724Purpose of Disbursement  
Gasoline

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B16A14A3A865641B8813

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	6

Amount of Each Disbursement this Period

31.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. 1-800-flowers**

Mailing Address 1600 Stewart Ave.

City State Zip Code  
Westbury NY 11590Purpose of Disbursement  
TY Flowers

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B5E7B12ECA6804E939AC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	6

Amount of Each Disbursement this Period

176.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry UnitCity State Zip Code  
Long Branch NJ 07740Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B6A1644504204438AA6C

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	6

Amount of Each Disbursement this Period

3.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

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



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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. LaLomita Dos Restaurant**

Mailing Address 308 Penn. Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD43D8DACFF734C2B871

Date of Disbursement

12 / 07 / 2006

Amount of Each Disbursement this Period

605.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Monmouth Bottle Shop**

Mailing Address 201 Monmouth Rd.

City Oakhurst State NJ Zip Code 07755

Purpose of Disbursement  
Bev./Gift

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B78F32C45951B45D4923

Date of Disbursement

12 / 10 / 2006

Amount of Each Disbursement this Period

36.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Stamps

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B7FF9DED84432490E860

Date of Disbursement

12 / 11 / 2006

Amount of Each Disbursement this Period

117.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

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

0.00

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

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A. Toys R US**

Mailing Address 137 Hwy 35

City State Zip Code  
Eatontown NJ 07724Purpose of Disbursement  
Toys for Tots donation

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B640DDC1FA0444B39BF1

Date of Disbursement

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

Amount of Each Disbursement this Period

26.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Us Postal Service**Mailing Address 60 Third Ave.  
Business Mail Entry UnitCity State Zip Code  
Long Branch NJ 07740Purpose of Disbursement  
Postage

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BF423861064B7404E934

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

2.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. 1-800-flowers**

Mailing Address 1600 Stewart Ave.

City State Zip Code  
Westbury NY 11590Purpose of Disbursement  
TY Flowers

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B82961740B2AF445C8EA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

54.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Casa Comida**

Mailing Address 336 Branchport Ave.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Food/Bev.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BED9E7873343140A991A

Date of Disbursement

12 / 14 / 2006

Amount of Each Disbursement this Period

733.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Paypal, Inc.**

Mailing Address Main St.

City San Jose State CA Zip Code 95101

Purpose of Disbursement  
Administrative Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B47CA0AEFF2A84A4BB47

Date of Disbursement

12 / 16 / 2006

Amount of Each Disbursement this Period

74.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. 1-800-flowers**

Mailing Address 1600 Stewart Ave.

City Westbury State NY Zip Code 11590

Purpose of Disbursement  
TY Flowers

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B781FB2813561449489A

Date of Disbursement

12 / 18 / 2006

Amount of Each Disbursement this Period

117.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

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

0.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

## **A. Falvo's Liquors**

Mailing Address 197 Norwood Ave.

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Beverages

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BD4B77FB1E1B44CD680A

Date of Disbursement

12 / 20 / 2006

Amount of Each Disbursement this Period

81.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Us Postal Service**

Mailing Address 60 Third Ave.  
Business Mail Entry Unit

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Stamps

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: B793CC32CA959496A8CB

Date of Disbursement

12 / 27 / 2006

Amount of Each Disbursement this Period

117.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Jiffy Lube**

Mailing Address 210 Hwy 36

City W. Long Branch State NJ Zip Code 07764

Purpose of Disbursement  
Oil Change for car

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: BF1768B39CACF4A35853

Date of Disbursement

12 / 28 / 2006

Amount of Each Disbursement this Period

29.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

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

0.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Pallone for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) 1-800-flowers		<b>Transaction ID:</b> BA7E09D673D974067ACA <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 8 / 2 0 0 6</div> </div>	
Mailing Address 1600 Stewart Ave.		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>163.35</div> </div>	
City Westbury State NY Zip Code 11590	Purpose of Disbursement TY Flowers		
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Amtrak		<b>Transaction ID:</b> BB32D98131EA04DE3A6D <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 9 / 2 0 0 6</div> </div>	
Mailing Address Union Station		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>89.00</div> </div>	
City Washington State DC Zip Code 20002	Purpose of Disbursement Train Ticket		
Candidate Name	Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

[MEMO ITEM]

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

0.00

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

69510.78

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

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

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☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)  
Pallone for Congress

Full Name (Last, First, Middle Initial)

**A.** Lautenberg for Senate, Inc.

Mailing Address 226 Morgan Ave.

City Collingswood State NJ Zip Code 08108

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BFAF671AD1B7C47CB8A6

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** DCCC

Mailing Address 430 South Capitol St. Se

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Donation - Excess Funds

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BACE24AC02AE84F4387B

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Democratic Majority Pac

Mailing Address Po Box 3037

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** BCE37FE8DC22B43C1A95

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

22000.00

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

22000.00