



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Tabor for Senate**

Report Covering the Period: From: M M / D D / Y Y Y Y 03 / 01 / 2026 To: M M / D D / Y Y Y Y 05 / 13 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	10615.00	10615.00
(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)) .....	10615.00	10615.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	3826.40	3826.40
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	3826.40	3826.40
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>6788.60</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Tabor for Senate

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5224.00	5224.00
(ii) Unitemized.....	5391.00	5391.00
(iii) TOTAL of contributions from individuals ▶	10615.00	10615.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10615.00	10615.00
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.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10615.00	10615.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3826.40	3826.40
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 .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3826.40	3826.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10615.00
25. SUBTOTAL (add Line 23 and Line 24).....	10615.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3826.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6788.60

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 9  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Tabor for Senate**

**A.** Full Name (Last, First, Middle Initial)  
Atlantic County Federation of Republican Women

Mailing Address 20 Barr Av.

City: Linwood State: NJ Zip Code: 08221

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 07 / 2026

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

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

Mailing Address 106 10th St. N.

City: Brigantine State: NJ Zip Code: 08203

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation: None

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2026

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period  
300.00

Memo Item Contribution

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

Mailing Address 205 Ocala Road

City: Highland Lakes State: NJ Zip Code: 07422

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation: Retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 09 / 2026

Transaction ID : SA11AI.4327

Amount of Each Receipt this Period  
375.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional).....▶ 1675.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 9	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tabor for Senate**

A. Full Name (Last, First, Middle Initial) Greenberg, Anita, , , Mailing Address 447 Ticetown Rd.			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 09 / 2026	
City Old Bridge	State NJ	Zip Code 08857	Transaction ID : SA11AI.4325	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1500.00	
Name of Employer East Brunswick Animal Hospital		Occupation Veterinarian	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00		

B. Full Name (Last, First, Middle Initial) Hughes, Charles, , , Mailing Address 31 N. Childs St.			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 09 / 2026	
City Woodbury	State NJ	Zip Code 08096	Transaction ID : SA11AI.4282	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer None		Occupation Retired	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Michelson, William, H., , Mailing Address 556 Belvidere Av.			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 10 / 2026	
City Plainfield	State NJ	Zip Code 07062	Transaction ID : SA11AI.4098	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer Self		Occupation Lawyer	<input type="checkbox"/> Memo Item Contribution	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Tabor for Senate**

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

Mailing Address 556 Belvidere Av.

City: Plainfield      State: NJ      Zip Code: 07062

FEC ID number of contributing federal political committee: C

Name of Employer: Self      Occupation: Lawyer

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2026

**Transaction ID : SA11AI.4272**

Amount of Each Receipt this Period  
250.00

Memo Item Contribution

**B.** Full Name (Last, First, Middle Initial)  
Nina (Sticks Cigars, LLC), Dan, , ,

Mailing Address 1513 Main St.

City: Rahway      State: NJ      Zip Code: 07065

FEC ID number of contributing federal political committee: C

Name of Employer: All City Cleaning      Occupation: Manager

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
299.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2026

**Transaction ID : SA11AI.4113**

Amount of Each Receipt this Period  
299.00

Memo Item

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

Mailing Address

City      State      Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	549.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	5224.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tabor for Senate**

Full Name (Last, First, Middle Initial) <b>A. Brown Stone Bar &amp; Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2026
Mailing Address 932 Middlesex Av.		FEC Identification Number C
City Metuchen	State NJ	Zip Code 08840
Purpose of Disbursement Fundraising Event Venue	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 1248.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4321 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Deluxe (Printing)</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2026
Mailing Address PO Box 818094		FEC Identification Number C
City Cleveland	State OH	Zip Code 44181
Purpose of Disbursement Check Printing for Bank Account	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 344.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4305 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Elmore, James, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2026
Mailing Address 16 Ensign Av.		FEC Identification Number C
City Barnegat	State NJ	Zip Code 08005
Purpose of Disbursement Website Redesign	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4301 <input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2092.80
<b>TOTAL</b> 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)	PAGE 9 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tabor for Senate**

Full Name (Last, First, Middle Initial) <b>A. Michelson, William H., , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2026
Mailing Address 556 Belvidere Av.		FEC Identification Number C
City Plainfield	State NJ	Zip Code 07062
Purpose of Disbursement Treasurer Fees	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 600.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4317 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Michelson, William H., , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2026
Mailing Address 556 Belvidere Av.		FEC Identification Number C
City Plainfield	State NJ	Zip Code 07062
Purpose of Disbursement Treasurer Fees	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4320 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Vistaprint</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2026
Mailing Address 275 Wyman St.		FEC Identification Number C
City Waltham	State MA	Zip Code 02451
Purpose of Disbursement Printing Rack Cards	Category/Type 006	
Candidate Name	Amount of Each Disbursement this Period 340.42	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4298 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1440.42
<b>TOTAL</b> This Period (last page this line number only).....▶	3533.22