

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

Office Use Only

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

NORPAC

ADDRESS (number and street)

PO Box 5595

☐Check if different
than previously
reported. (ACC)

Englewood

NJ

07631

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00247403

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

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

Joel Davidson

Signature of Treasurer

Electronically Filed by Joel Davidson

Date

10

24

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 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		409655.47
(b) Cash on Hand at Beginning of Reporting Period	409655.47	
(c) Total Receipts (from Line 19)	257902.92	257902.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	667558.39	667558.39
7. Total Disbursements (from Line 31)	175150.95	175150.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	492407.44	492407.44
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	194002.00	194002.00
(i) Itemized (use Schedule A)	51556.00	51556.00
(ii) Unitemized	245558.00	245558.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	245558.00	245558.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2925.49	2925.49
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	9419.43	9419.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	257902.92	257902.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	257902.92	257902.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	138275.95	138275.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	138275.95	138275.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	36000.00	36000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	875.00	875.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	875.00	875.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	175150.95	175150.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	175150.95	175150.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	245558.00	245558.00
34. Total Contribution Refunds (from Line 28(d))	875.00	875.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	244683.00	244683.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	138275.95	138275.95
37. Offsets to Operating Expenditures (from Line 15, page 3)	2925.49	2925.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	135350.46	135350.46

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

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

FOR LINE NUMBER: PAGE 6 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 677 Rutland Ave

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing federal political committee.

C

Name of Employer
Blank Rome, LLPOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19034

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

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

Mailing Address 170 E. 87 St.

City State Zip Code
New York NY 10128

FEC ID number of contributing federal political committee.

C

Name of Employer
Goldman, Sachs, and Co.Occupation
Investment Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.19316

Amount of Each Receipt this Period

1000.00

check to Pence for Congress

[MEMO ITEM]

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

Mailing Address 470 Herkimer Avenue

City State Zip Code
Haworth NJ 07641

FEC ID number of contributing federal political committee.

C

Name of Employer
McDermott Will & EmeryOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.17881

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional) ▶

275.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jack Albalah

Mailing Address 36-18 Lindsay Rd.

City State Zip Code
 Fair Lawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.18691

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Rona Anhalt

Mailing Address 293 East Linden Ave

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novartis Pharmaceuticals

Occupation

Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18229

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Rona Anhalt

Mailing Address 293 East Linden Ave

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novartis Pharmaceuticals

Occupation

Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.18781

Amount of Each Receipt this Period

100.00

In-kind - bus driver tip
May DC trip

SUBTOTAL of Receipts This Page (optional)

465.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Kenneth Anolik

Mailing Address 320 Raritan Ave
Suite 205

City State Zip Code
Highland Park NJ 08904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.18146

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

B. Drora Arussy

Mailing Address 23 Chittenden Road

City State Zip Code
Fair Lawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Drew University

Occupation
Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18474

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Drora Arussy

Mailing Address 23 Chittenden Road

City State Zip Code
Fair Lawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Drew University

Occupation
Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18473

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

695.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Ashenberg

Mailing Address 484 Sunderland Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19032

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Barry Badner

Mailing Address 261 Robin Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Zehar and Badner

Occupation

Mgmt Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19031

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Harris Bak

Mailing Address 132 Overlook Road

City State Zip Code
 New Rochelle NY 10804

FEC ID number of contributing
federal political committee.

C

Name of Employer

milliman, Inc.

Occupation

Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.18195

Amount of Each Receipt this Period

830.00

SUBTOTAL of Receipts This Page (optional)

830.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Howard Baruch

Mailing Address 130 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18873

Amount of Each Receipt this Period

250.00

check to Mark Pryor for
Senate

[MEMO ITEM]

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

Howard Baruch

Mailing Address 130 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19030

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

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

Howard Baruch

Mailing Address 130 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18400

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 11 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Howard Baruch		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 130 Dwight Pl.		Transaction ID: SA11A1.19118
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Physician	check to Coleman for Sena- te [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Laurie Baumel		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 7
Mailing Address 797 Winthrop Rd.		Transaction ID: SA11A1.17739
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer none	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C. Full Name (Last, First, Middle Initial) Laurie Baumel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 7
Mailing Address 797 Winthrop Rd.		Transaction ID: SA11A1.18194
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer none	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Laurie Baumel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 797 Winthrop Rd.		Transaction ID: SA11A1.18904
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00
Name of Employer none	Occupation Housewife	credit card to Berkley for Congress
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Laurie Baumel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 797 Winthrop Rd.		Transaction ID: SA11A1.18788
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer none	Occupation Housewife	In-kind - bus driver tip May DC trip
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C. Full Name (Last, First, Middle Initial) Alan Berger		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 24 Sutton Pl.		Transaction ID: SA11A1.17712
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Alan Berger

Mailing Address 24 Sutton Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19155

Amount of Each Receipt this Period

2000.00

credit card to Coleman for
Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Deborah Berger

Mailing Address 24 Sutton Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18905

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Karen Berger

Mailing Address 14 Kinzel Ln

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11A1.17836

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Marc Berger Mailing Address 210 W. 89th St. City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer self Occupation self physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>225.00</div>		Date of Receipt <div>01 / 30 / 2007</div> Transaction ID: SA11A1.17764 Amount of Each Receipt this Period <div>225.00</div>
B. Full Name (Last, First, Middle Initial) Marc Berger Mailing Address 210 W. 89th St. City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer self Occupation self physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>05 / 31 / 2007</div> Transaction ID: SA11A1.19154 Amount of Each Receipt this Period <div>2000.00</div> credit card to Coleman for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Marc Berger Mailing Address 210 W. 89th St. City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer self Occupation self physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>06 / 19 / 2007</div> Transaction ID: SA11A1.19268 Amount of Each Receipt this Period <div>250.00</div> check to Specter for Senate [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Barry Berkowitz
Mailing Address 232 S. Dwight Pl.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

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

Transaction ID: SA11A1.18286

Amount of Each Receipt this Period

265.00

B. Full Name (Last, First, Middle Initial)
Harry Bernstein
Mailing Address 28 Columbia Ave.

City State Zip Code
Colonia NJ 07067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sample Bixel Assoc.

Occupation
Fund Raiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17826

Amount of Each Receipt this Period

125.00

C. Full Name (Last, First, Middle Initial)
Harry Bernstein
Mailing Address 28 Columbia Ave.

City State Zip Code
Colonia NJ 07067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sample Bixel Assoc.

Occupation
Fund Raiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.00

Date of Receipt

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

Transaction ID: SA11A1.18777

Amount of Each Receipt this Period

167.00

In-kind - train for May
DC trip help

SUBTOTAL of Receipts This Page (optional)

557.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Harry Bernstein Mailing Address 28 Columbia Ave. City State Zip Code Colonia NJ 07067 FEC ID number of contributing federal political committee. C Name of Employer Semple Bixel Assoc. Occupation Fund Raiser Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 792.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7 Transaction ID: SA11A1.18155 Amount of Each Receipt this Period 400.00
B. Full Name (Last, First, Middle Initial) Harry Bernstein Mailing Address 28 Columbia Ave. City State Zip Code Colonia NJ 07067 FEC ID number of contributing federal political committee. C Name of Employer Semple Bixel Assoc. Occupation Fund Raiser Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.19291 Amount of Each Receipt this Period 100.00 check to Ferguson for Congress [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Lawrence Bernstein Mailing Address 100 E Huron St Apt 4002 City State Zip Code Chicago IL 60611 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Transaction ID: SA11A1.19317 Amount of Each Receipt this Period 1000.00 check to Pence for Congress [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 17 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Irwin Bialer Mailing Address 3C Yarmouth Dr. City State Zip Code Monroe Township NJ 08831 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: SA11A1.18374 Amount of Each Receipt this Period 265.00
B. Full Name (Last, First, Middle Initial) Morris Bienenfeld Mailing Address 533 Warwick Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation Woff & Samson PC Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.19029 Amount of Each Receipt this Period 250.00 check to Levin for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Gail Billig Mailing Address 311 Walnut St. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Occupation none retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.19027 Amount of Each Receipt this Period 250.00 check to Levin for Senate [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Muriel Blum		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 11 Wadsworth Ter		Transaction ID: SA11A1.19295
City Cranford	State NJ	Zip Code 07016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer 	Occupation Retired	check to Ferguson for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Michael Blumenthal		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 139 Huguenot Ave.		Transaction ID: SA11A1.18331
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C. Full Name (Last, First, Middle Initial) Barbara Bortniker		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 4 Kinzel Lane		Transaction ID: SA11A1.17804
City West Orange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Barbara Bortniker Mailing Address 4 Kinzel Lane City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 8 / 2 0 0 7 Transaction ID: SA11A1.18008 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Barbara Bortniker Mailing Address 4 Kinzel Lane City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 925.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Transaction ID: SA11A1.18806 Amount of Each Receipt this Period 200.00 In-kind - bus driver tips May DC trip
C. Full Name (Last, First, Middle Initial) Barbara Bortniker Mailing Address 4 Kinzel Lane City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 945.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Transaction ID: SA11A1.18808 Amount of Each Receipt this Period 20.00 In-kind - bus parking May DC trip

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.18810

Amount of Each Receipt this Period

76.00

In-kind - coffee West Ora-
nge bus DC trip

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

Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

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

Transaction ID: SA11A1.18454

Amount of Each Receipt this Period

204.00

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

Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19288

Amount of Each Receipt this Period

100.00

check to Ferguson for Con-
gress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Maurice Bortz

Mailing Address 64 Meadow Dr.

City State Zip Code
Woodmere NY 11598

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDT

Occupation
Business Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
05 08 2007

Transaction ID: SA11A1.18626

Amount of Each Receipt this Period

265.00

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

Hannah-Jean Brafman

Mailing Address 269 Fountain Rd

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
03 25 2007

Transaction ID: SA11A1.19026

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

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

Hannah-Jean Brafman

Mailing Address 269 Fountain Rd

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
04 23 2007

Transaction ID: SA11A1.18907

Amount of Each Receipt this Period

500.00

check to Berkley for Congress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Hannah-Jean Brafman Mailing Address 269 Fountain Rd City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1965.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 8 / 2 0 0 7 Transaction ID: SA11A1.18358 Amount of Each Receipt this Period 1965.00
B. Full Name (Last, First, Middle Initial) Martin Braun Mailing Address 218 Sunset Ave. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Leo Schachter & Co. Occupation Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7 Transaction ID: SA11A1.17983 Amount of Each Receipt this Period 1250.00
C. Full Name (Last, First, Middle Initial) Robert Braun Mailing Address 105 Lakeshore Dr City Rockaway State NJ Zip Code 07866 FEC ID number of contributing federal political committee. C Name of Employer Picatinny Arsenal Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: SA11A1.17866 Amount of Each Receipt this Period 225.00

SUBTOTAL of Receipts This Page (optional)

3440.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Norma Brecker Mailing Address 502 Salem Street City Paramus State NJ Zip Code 07652 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation HR Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.18564 Amount of Each Receipt this Period 265.00
B. Full Name (Last, First, Middle Initial) Ivan Bresgi Mailing Address 400 Warwick Ave City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer NY Presbyterian Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.19217 Amount of Each Receipt this Period 360.00 check to Durbin for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Shalom Bronstein Mailing Address 736 Grange Road City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.18573 Amount of Each Receipt this Period 265.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 24 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Lisa Bruckner		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 524 Warwick Ave		Transaction ID: SA11A1.18908
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Altire Co, Inc	Occupation Architect	check to Berkley for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Laurie Bryk		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 234 briarwood crossing		Transaction ID: SA11A1.18294
City Lawrence	State NY	Zip Code 11559
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C. Full Name (Last, First, Middle Initial) Ephraim Casper		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7
Mailing Address 1681 Buckingham Road		Transaction ID: SA11A1.19025
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Memorial Sloan Kettering Cancer Ctr	Occupation Physician	check to Levin for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Ben Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self (Emergimed) Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt MM / DD / YYYY 03 / 18 / 2007 Transaction ID: SA11A1.18053 Amount of Each Receipt this Period 265.00
B. Full Name (Last, First, Middle Initial) Ben Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self (Emergimed) Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 03 / 20 / 2007 Transaction ID: SA11A1.18841 Amount of Each Receipt this Period 200.00 credit card to McCain 2008 Explor [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Ben Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self (Emergimed) Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 03 / 22 / 2007 Transaction ID: SA11A1.18844 Amount of Each Receipt this Period 2000.00 credit card to McCain 2008 Explor [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Ben Chouake		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.18846
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self (Emergimed)	Occupation MD	credit card to McCain 2008 Explor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Ben Chouake		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.19150
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self (Emergimed)	Occupation MD	credit card to Coleman for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Ben Chouake		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 245 Hutchinson Rd.		Transaction ID: SA11A1.18867
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self (Emergimed)	Occupation MD	check to Pat Roberts for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Ben Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Emergimed)

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.19274

Amount of Each Receipt this Period

1000.00

credit card to Specter for
Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Esther Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cliffside Medical

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18875

Amount of Each Receipt this Period

2000.00

credit card to Mark Pryor
for Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Esther Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cliffside Medical

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18840

Amount of Each Receipt this Period

300.00

credit card to McCain 2008
Explor

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Esther Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Cliffside Medical Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7 Transaction ID: SA11A1.18843 Amount of Each Receipt this Period 2000.00 credit card to McCain 2008 Explor [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Esther Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Cliffside Medical Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.19024 Amount of Each Receipt this Period 1000.00 credit card to Levin for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Esther Chouake Mailing Address 245 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Cliffside Medical Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7 Transaction ID: SA11A1.18845 Amount of Each Receipt this Period 300.00 credit card to McCain 2008 Explor [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Esther Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cliffside Medical

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18927

Amount of Each Receipt this Period

1000.00

credit card to Berkley for
Congress

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Esther Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cliffside Medical

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.19235

Amount of Each Receipt this Period

1000.00

credit card to Durbin for
Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Esther Chouake
Mailing Address 245 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cliffside Medical

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18831

Amount of Each Receipt this Period

2000.00

credit card to K Swett for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

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

David Cohain

Mailing Address 363 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.18144

Amount of Each Receipt this Period

330.00

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

Abbie Cohen

Mailing Address 46 Ferris Dr

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jewish Family Service

Occupation
Employment Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18455

Amount of Each Receipt this Period

265.00

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

Jordan Comet

Mailing Address 463 Cape May St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19119

Amount of Each Receipt this Period

250.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Daube

Mailing Address 4616 Arlington Ave.

City State Zip Code
 Riverdale NY 10471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hawthorne Cedar Knolls Sc-
hool

Occupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18910

Amount of Each Receipt this Period

40.00

credit card to Berkley for
Congress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jeffrey Daube

Mailing Address 4616 Arlington Ave.

City State Zip Code
 Riverdale NY 10471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hawthorne Cedar Knolls Sc-
hool

Occupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.18387

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Cheryl Dauber

Mailing Address 180 Lyman Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Interior Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19059

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 264 Churchill Rd

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19218

Amount of Each Receipt this Period

200.00

check to Durbin for Senate

[MEMO ITEM]

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

Mailing Address 4 Copper Beach Lane

City State Zip Code
Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18452

Amount of Each Receipt this Period

265.00

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

Mailing Address 293 East Palisade Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence B Diener, Esq

Occupation
Administrative Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.17895

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1265.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Lawrence Diener		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 293 E. Palisade Avenue		Transaction ID: SA11A1.19156
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Attorney	check to Coleman for Sena- te [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Linda Dresner		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 711 S. Bates Street		Transaction ID: SA11A1.18715
City Birmingham	State MI	Zip Code 48009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Edward C. Levy Co.	Occupation Retail Merchant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Mark Druck		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7
Mailing Address 650 Palmer Ave.		Transaction ID: SA11A1.19219
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Physician	check to Durbin for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Rochelle Dweck Mailing Address 2121 East 2nd St City State Zip Code Brooklyn NY 11223 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.19120 Amount of Each Receipt this Period 250.00 credit card to Coleman for Senate [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Sam Ebel Mailing Address 765 Washburn st. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation IBM Project Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 2 / 2 0 0 7 Transaction ID: SA11A1.18248 Amount of Each Receipt this Period 265.00
C. Full Name (Last, First, Middle Initial) Kenneth Eckstein Mailing Address 357 Maple St. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Occupation Kramer Levin Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.18912 Amount of Each Receipt this Period 250.00 check to Berkley for Congress [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Judi Eisenman

Mailing Address 638 Evergreen Drive

City State Zip Code
West Hempstead NY 11552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
04 22 2007

Transaction ID: SA11A1.18249

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Pamela Ennis

Mailing Address 400 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ma'ayanot High School

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
04 24 2007

Transaction ID: SA11A1.18305

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Reuven Escott

Mailing Address 55 Regent St.

City State Zip Code
Bergenfield NJ 07621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Securities Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
03 25 2007

Transaction ID: SA11A1.19023

Amount of Each Receipt this Period

250.00

credit card to Levin for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 36 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Reuven Escott

Mailing Address 55 Regent St.

City State Zip Code
 Bergenfield NJ 07621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Securities Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18824

Amount of Each Receipt this Period

250.00

credit card to Giuliani
'08 Pres Cmte

[MEMO ITEM]

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

Reuven Escott

Mailing Address 55 Regent St.

City State Zip Code
 Bergenfield NJ 07621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Securities Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18913

Amount of Each Receipt this Period

500.00

credit card to Berkley for
Congress

[MEMO ITEM]

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

Susan Fader

Mailing Address 435 Warwick Ave

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fader & Associates

Occupation
Market Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19057

Amount of Each Receipt this Period

180.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 37 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Dan Feder Mailing Address 44 West 62nd St. City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. C Name of Employer Acker & Li Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 725.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.18453 Amount of Each Receipt this Period 600.00
B. Full Name (Last, First, Middle Initial) Dan Feder Mailing Address 44 West 62nd St. City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. C Name of Employer Acker & Li Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 825.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.18464 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) Dan Feder Mailing Address 44 West 62nd St. City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. C Name of Employer Acker & Li Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 1 / 2 0 0 7 Transaction ID: SA11A1.18868 Amount of Each Receipt this Period 250.00 check to Pat Roberts for Senate [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Charles Feldman
Mailing Address 1649 Hanover Street

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11A1.17684

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Charles Feldman
Mailing Address 1649 Hanover Street

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19022

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Hershel Feldman
Mailing Address 250 Hutchinson Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Macabee Trading

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.18360

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

2830.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Hershel Feldman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 250 Hutchinson Rd.		Transaction ID: SA11A1.19122
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Macabee Trading	Occupation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

check to Coleman for Sena-
te

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Michael Felsen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7
Mailing Address 51 Westminster Ave		Transaction ID: SA11A1.18062
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Beth Israel Medical Center	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C. Full Name (Last, First, Middle Initial) Laraine Fergenson		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 9 Marcotte Ln.		Transaction ID: SA11A1.17877
City Tenafly	State NJ	Zip Code 07670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Iona College	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)

565.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 40 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Daniel Feuer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 335 Robin Road		Transaction ID: SA11A1.19123
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self	Occupation Physician	check to Coleman for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Mark Finkel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 182 Hillside Ave.		Transaction ID: SA11A1.18914
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 360.00
Name of Employer Emerging Growth Associates	Occupation Technology Consultant	check to Berkley for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) richard finkel		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 7 / 2 0 0 7
Mailing Address 715 Winthrop Rd.		Transaction ID: SA11A1.17731
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mollie Fisch

Mailing Address 300 Merrison Street

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schering Plough Pharmaceu-
ticals

Occupation
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18267

Amount of Each Receipt this Period

265.00

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

Susan Fishbein Druck

Mailing Address 481 Cape May St

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18911

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

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

Susan Fishbein Druck

Mailing Address 481 Cape May St

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.18847

Amount of Each Receipt this Period

500.00

check to McCain 2008 Expl-
or

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Cookie Fishel

Mailing Address 348 Jones Rd

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18929

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

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

David Fishel

Mailing Address 348 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Financier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.17698

Amount of Each Receipt this Period

1000.00

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

David Fishel

Mailing Address 348 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Financier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18878

Amount of Each Receipt this Period

500.00

check to Mark Pryor for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 43 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) David Fishel		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7
Mailing Address 348 Jones Rd.		Transaction ID: SA11A1.19019
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Financier	check to Levin for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) David Fishel		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 348 Jones Rd.		Transaction ID: SA11A1.18412
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
Name of Employer Self	Occupation Financier	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1165.00	

C. Full Name (Last, First, Middle Initial) David Flamholz		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 7
Mailing Address 300 Sunset Ave.		Transaction ID: SA11A1.17714
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer Abeles & Heymann	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional)

4165.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

David Flamholz

Mailing Address 300 Sunset Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Abeles & Heymann

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18838

Amount of Each Receipt this Period

1000.00

credit card to McCain 2008
Explor

[MEMO ITEM]

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

Stephen Flatow

Mailing Address 13 Howell Dr

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vested Title Inc.

Occupation
Attorney/Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17817

Amount of Each Receipt this Period

250.00

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

David Foni

Mailing Address 266 Arch Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18931

Amount of Each Receipt this Period

180.00

check to Berkley for Cong-
ress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 45 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Morton Fridman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7
Mailing Address 826 Winthrop Rd		Transaction ID: SA11A1.18879
City Teaneck	State NJ	Amount of Each Receipt this Period 500.00
Zip Code 07666		
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	credit card to Mark Pryor for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Morton Fridman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address 826 Winthrop Rd		Transaction ID: SA11A1.19036
City Teaneck	State NJ	Amount of Each Receipt this Period 500.00
Zip Code 07666		
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	credit card to Levin for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Morton Fridman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 826 Winthrop Rd		Transaction ID: SA11A1.18779
City Teaneck	State NJ	Amount of Each Receipt this Period 300.00
Zip Code 07666		
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Physician	In-kind - bus driver tips May DC trip
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Morton Fridman

Mailing Address 826 Winthrop Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19149

Amount of Each Receipt this Period

500.00

credit card to Coleman for
Senate

[MEMO ITEM]

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

Morton Fridman

Mailing Address 826 Winthrop Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19220

Amount of Each Receipt this Period

500.00

credit card to Durbin for
Senate

[MEMO ITEM]

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

Morton Fridman

Mailing Address 826 Winthrop Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.19269

Amount of Each Receipt this Period

500.00

credit card to Specter for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Morton Fridman
Mailing Address 826 Winthrop Rd

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18832

Amount of Each Receipt this Period

500.00

credit card to K Swett for
Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Beth Fried
Mailing Address 140 Walnut St

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.18365

Amount of Each Receipt this Period

265.00

C. Full Name (Last, First, Middle Initial)
Jerald Friedman
Mailing Address 1626 Buckingham Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Oral surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18524

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jerald Friedman

Mailing Address 1626 Buckingham Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Oral surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19055

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Michele Friedman

Mailing Address 257 Maple St

City State Zip Code
 West Hempstead NY 11552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Emunah

Occupation
Chef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18459

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Samuel Friedman

Mailing Address 316 State St.

City State Zip Code
 Hackensack NJ 07601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19056

Amount of Each Receipt this Period

72.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Richard Friend		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 34 Sutton Pl.		Transaction ID: SA11A1.19124
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Stage Accents	Occupation Owner	check to Coleman for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Leonard Fuld		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 779 Washburn Street		Transaction ID: SA11A1.19054
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer SLB	Occupation CPA	credit card to Levin for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) Karen Futter		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 720 Downing St.		Transaction ID: SA11A1.18205
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 365.00
Name of Employer	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Michael Gartenberg

Mailing Address 297 Ogden Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jupitermedia corp.

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.17867

Amount of Each Receipt this Period

275.00

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

Jonathan Gellis

Mailing Address 235 New Bridge Rd.

City State Zip Code
 New Milford NJ 07646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sloan Securities

Occupation
Stock Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11A1.17723

Amount of Each Receipt this Period

375.00

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

Charles Gershbaum

Mailing Address 408 N. 8th Ave

City State Zip Code
 Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gershbaum & Weisz, PC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.19240

Amount of Each Receipt this Period

100.00

credit card to Durbin for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Tom Gessler

Mailing Address 2179 South St.

City State Zip Code
 Fort Lee NJ 07024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18915

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Leon Glaser

Mailing Address 15 Barlow Rd

City State Zip Code
 Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT & T

Occupation
Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17862

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Margie Glatt

Mailing Address 1035 Hazel Place

City State Zip Code
 Woodmere NY 11598

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sutton Land

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18578

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Aryeh Glatter

Mailing Address 312 Churchill Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19018

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. David Gleaner

Mailing Address 10 Gerdes Ave.

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17865

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Toby Glick

Mailing Address 266 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19221

Amount of Each Receipt this Period

150.00

check to Durbin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 53 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Anne Gontownik

Mailing Address 250 Mountain Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17986

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Anne Gontownik

Mailing Address 250 Mountain Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11A1.18210

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Anne Gontownik

Mailing Address 250 Mountain Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18916

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Jerry Gontownik
Mailing Address 250 Mountain Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stone Post Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18877

Amount of Each Receipt this Period

500.00

credit card to Mark Pryor
for Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Jerry Gontownik
Mailing Address 250 Mountain Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stone Post Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19125

Amount of Each Receipt this Period

1000.00

check to Coleman for Sena-
te

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Robert Goodman
Mailing Address 473 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18872

Amount of Each Receipt this Period

1000.00

check to Mark Pryor for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 55 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Robert Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7
Mailing Address 473 Winthrop Rd.		Transaction ID: SA11A1.19017
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Columbia University	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
		check to Levin for Senate [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Robert Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 473 Winthrop Rd.		Transaction ID: SA11A1.18378
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
Name of Employer Columbia University	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

C. Full Name (Last, First, Middle Initial) Robert Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 473 Winthrop Rd.		Transaction ID: SA11A1.18792
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Columbia University	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
		In-kind - bus driver tip May DC trip

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 56 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Robert Goodman

Mailing Address 473 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19126

Amount of Each Receipt this Period

2000.00

check to Coleman for Sena-
te

[MEMO ITEM]

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

Robert Goodman

Mailing Address 473 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.19310

Amount of Each Receipt this Period

2000.00

check to Pence for Congre-
ss

[MEMO ITEM]

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

Robert Goodman

Mailing Address 473 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.19236

Amount of Each Receipt this Period

2300.00

credit card to Durbin for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 57 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Robert Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 473 Winthrop Rd.		Transaction ID: SA11A1.19238
City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1700.00	
FEC ID number of contributing federal political committee. C	credit card to Durbin for Senate	
Name of Employer Columbia University	Occupation Physician	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Sarah Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 473 Winthrop Rd		Transaction ID: SA11A1.19237
City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C	credit card to Durbin for Senate	
Name of Employer Self	Occupation Social Worker	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) Sarah Goodman		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7
Mailing Address 473 Winthrop Rd		Transaction ID: SA11A1.19239
City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1700.00	
FEC ID number of contributing federal political committee. C	credit card to Durbin for Senate	
Name of Employer Self	Occupation Social Worker	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 58 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Laurie Gordon		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7
Mailing Address 308 W 104 St		Transaction ID: SA11A1.17872
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Mt. Sinai Hospital	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Norman Gorlyn		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 150 Madison Ave.		Transaction ID: SA11A1.19127
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Self	Occupation Realtor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

check to Coleman for Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Irene Gottesman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 285 Sunset Ave		Transaction ID: SA11A1.18783
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

In-kind - bus driver tip
May DC trip

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 59 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Paula Gottesman
Mailing Address 7 Quaker Ridge Road

City State Zip Code
Morristown NJ 07960

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: SA11A1.17686

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Robert M. Gottesman
Mailing Address 285 Sunset Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18876

Amount of Each Receipt this Period

500.00

check to Mark Pryor for
Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Robert M. Gottesman
Mailing Address 285 Sunset Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18918

Amount of Each Receipt this Period

2000.00

check to Berkley for Cong-
ress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 60 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11A1.18426

Amount of Each Receipt this Period

500.00

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

Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.18785

Amount of Each Receipt this Period

100.00

In-kind - bus driver tip
May DC trip

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

Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19128

Amount of Each Receipt this Period

500.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 61 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Robert M. Gottesman
Mailing Address 285 Sunset Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.19270

Amount of Each Receipt this Period

500.00

check to Specter for Sena-
te

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Robert M. Gottesman
Mailing Address 285 Sunset Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19241

Amount of Each Receipt this Period

500.00

check to to Durbin for Se-
nate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
David Greenblatt
Mailing Address 130 Beech Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Valley Hospital

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18521

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 62 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jason Greenblatt

Mailing Address 533 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Trump Organization

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19015

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Sidney Greenfield

Mailing Address 1530 Palisade Ave
Apt 6J

City

Fort Lee

State

NJ

Zip Code

07024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18074

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Alan Greenspan

Mailing Address 545 Winthrop Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19013

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 63 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Martin Greenwald
Mailing Address 558 Warwick Avenue

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
n/a

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19012

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Steven Grodtko
Mailing Address 596 South Forest Dr

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oppenheimer

Occupation
Stockbroker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19052

Amount of Each Receipt this Period

180.00

check to Levin for Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Jack Gross
Mailing Address 1990 Presidential Dr.

City State Zip Code
Whitehall PA 18052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.18435

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 64 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Reuben E. Gross Mailing Address 1299 Wellington Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		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>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.18009 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	2	/	2	0	0	7	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3	/	1	2	/	2	0	0	7																							
250.00																																
B. Full Name (Last, First, Middle Initial) Reuben E. Gross Mailing Address 1299 Wellington Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .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>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.19011 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> check to Levin for Senate [MEMO ITEM]	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	5	/	2	0	0	7	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3	/	2	5	/	2	0	0	7																							
200.00																																
C. Full Name (Last, First, Middle Initial) Reuben E. Gross Mailing Address 1299 Wellington Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		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>4</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.18135 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	5	/	2	0	0	7	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	4	/	0	5	/	2	0	0	7																							
1000.00																																

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 65 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
 Reuben E. Gross
 Mailing Address 1299 Wellington Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19222

Amount of Each Receipt this Period

250.00

check to Durbin for Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
 Robert Grossman
 Mailing Address 78 Winding Way

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fitch Ratings

Occupation
Bond Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: SA11A1.17905

Amount of Each Receipt this Period

2050.00

C. Full Name (Last, First, Middle Initial)
 Jack Halpern
 Mailing Address 160 W. 66th St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18011

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

7050.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 66 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Jack Halpern

Mailing Address 160 W. 66th St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18885

Amount of Each Receipt this Period

1000.00

check to Mark Pryor for
Senate

[MEMO ITEM]

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

Jack Halpern

Mailing Address 160 W. 66th St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19010

Amount of Each Receipt this Period

1000.00

check to Levin for Senate

[MEMO ITEM]

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

Jack Halpern

Mailing Address 160 W. 66th St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Atlantic Realty

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18822

Amount of Each Receipt this Period

2300.00

check to Giuliani '08 Pres
Cmte

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 67 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
 Jack Halpern
 Mailing Address 160 W. 66th St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing federal political committee.

C

Name of Employer
Atlantic RealtyOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18823

Amount of Each Receipt this Period

2300.00

check to Giuliani '08 Pres Cmte

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
 Lieba Halpern
 Mailing Address 160 W. 66 St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing federal political committee.

C

Name of Employer
noneOccupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18837

Amount of Each Receipt this Period

2100.00

check to McCain 2008 Expl-or

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
 Lieba Halpern
 Mailing Address 160 W. 66 St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing federal political committee.

C

Name of Employer
noneOccupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18012

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 68 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Marc Hanfling

Mailing Address 47 Leslie St.

City State Zip Code
 Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.19292

Amount of Each Receipt this Period

100.00

check to Ferguson for Con-
gress

[MEMO ITEM]

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

Debbie Haramati

Mailing Address 1195 The Strand

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Interior Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18549

Amount of Each Receipt this Period

365.00

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

Judith Hecklen

Mailing Address 734 Rutland Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
CSFB

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19009

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Sam Heller

Mailing Address 7-07 Fair Haven Pl

City State Zip Code
 Fair Lawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.18466

Amount of Each Receipt this Period

100.00

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

Beth Hindin

Mailing Address 79 Crystal Avenue

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Registered Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.18611

Amount of Each Receipt this Period

330.00

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

Susan Hirsch

Mailing Address 280 Old Somerset Rd

City State Zip Code
 Watchung NJ 07069

FEC ID number of contributing
federal political committee.

C

Name of Employer
TIAA-CREF

Occupation
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.18354

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

695.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 70 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Ari HoffnungMailing Address 2600 Netherland Ave
Apt 914

City	State	Zip Code
Bronx	NY	10463

FEC ID number of contributing
federal political committee.**C**Name of Employer
Bear StearnsOccupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.18035

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Barry Honig

Mailing Address 151 Deerfield Drive

City	State	Zip Code
Tenafly	NJ	07670

FEC ID number of contributing
federal political committee.**C**Name of Employer
North Jersey RepublicansOccupation
executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18072

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Ari Horowitz

Mailing Address 21 Peach Orchard Drive

City	State	Zip Code
East Brunswick	NJ	08816

FEC ID number of contributing
federal political committee.**C**Name of Employer
SelfOccupation
Sales - insurance and investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	0	7

Transaction ID: SA11A1.17750

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

840.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
 Frederick Horowitz
 Mailing Address 180 S. Woodland St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
AP Deauville LLCOccupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19158

Amount of Each Receipt this Period

180.00

check to Coleman for Sena-
te

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
 Mark Horowitz
 Mailing Address 326 Winthrop Road

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing federal political committee.

C

Name of Employer
MDOccupation
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.18197

Amount of Each Receipt this Period

265.00

C. Full Name (Last, First, Middle Initial)
 Beatrice Huppert
 Mailing Address 51 Dana Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
Eye ConsultantsOccupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18505

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 72 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Beatrice Huppert

Mailing Address 51 Dana Pl

City	State	Zip Code
Englewood	NJ	07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eye ConsultantsOccupation
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18563

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Edward Izso

Mailing Address 161 Van Nostrand Ave.

City	State	Zip Code
Englewood	NJ	07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Main Event CaterersOccupation
Caterer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18562

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Lawrence Jaffe

Mailing Address 1657 Hanover St.

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19051

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Michelle Jaspan

Mailing Address 170 East 87th St.

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weltman and Moskowitz

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18605

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Toby Jungreis

Mailing Address 724 Long Acre Ave

City State Zip Code
 Woodmere NY 11598

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Veterinarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18070

Amount of Each Receipt this Period

165.00

Full Name (Last, First, Middle Initial)

C. Richard Kahn

Mailing Address 405 Winthrop

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cole, Schotz

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19223

Amount of Each Receipt this Period

1000.00

check to Durbin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 786 Downing St

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.17971

Amount of Each Receipt this Period

300.00

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

Mailing Address 551 Warwick Ave.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hilco Real Estate

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18417

Amount of Each Receipt this Period

365.00

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

Mailing Address 218 Van Nostrand Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dennis Interactive, Inc.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11A1.17702

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

915.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Michael Kassen

Mailing Address 315 North Ave

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

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

Transaction ID: SA11A1.18010

Amount of Each Receipt this Period

3600.00

Full Name (Last, First, Middle Initial)

B. Michael Kastner

Mailing Address 726 Winthrop Rd

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glatt Express

Occupation
Food business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19007

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Avi Katz

Mailing Address 1460 Hudson Rd.

City

Teaneck

State

NJ

Zip Code

07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19050

Amount of Each Receipt this Period

100.00

credit card to Levin for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Lester Katz
Mailing Address 573 Winthrop Rd

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19005

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Philip Kazlow
Mailing Address 591 Churchill Rd

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbia U

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19048

Amount of Each Receipt this Period

200.00

check to Levin for Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Irwin Keller
Mailing Address 27 Darby Rd.

City State Zip Code
East Brunswick NJ 08816

FEC ID number of contributing
federal political committee.

C

Name of Employer
University Radiology Group

Occupation
Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11A1.17936

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Irwin Keller Mailing Address 27 Darby Rd. City State Zip Code East Brunswick NJ 08816 FEC ID number of contributing federal political committee. C Name of Employer University Radiology Group Occupation Radiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 7 Transaction ID: SA11A1.17949 Amount of Each Receipt this Period 125.00
B. Full Name (Last, First, Middle Initial) Marjorie Kellner Mailing Address 16 Cedarhurst Ave City State Zip Code Cedarhurst NY 11516 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Hedgefund Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.18462 Amount of Each Receipt this Period 600.00
C. Full Name (Last, First, Middle Initial) Judy Kershner Mailing Address 292 Robin Rd City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Hackensack U Medical Center Occupation Physical Therapist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: SA11A1.18394 Amount of Each Receipt this Period 265.00

SUBTOTAL of Receipts This Page (optional)

990.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 78 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Aaron Kinderlehrer

Mailing Address 138-12 76th Ave

City State Zip Code
 Kew Garden Hills NY 11367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19003

Amount of Each Receipt this Period

260.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Moshe Kinderlehrer

Mailing Address 188 Grayson Pl

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19002

Amount of Each Receipt this Period

180.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Beryl Kirschenbaum

Mailing Address 332 Meehon Ave

City State Zip Code
 West Lawrence NY 11691

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18447

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 79 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Aryeh Klahr Mailing Address 90 S. Woodland St. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Industrial Med. Associates PC Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.19129 Amount of Each Receipt this Period 180.00 check to Coleman for Sena- te [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Charlie Kleiner Mailing Address 546 Churchill Rd. City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7 Transaction ID: SA11A1.18346 Amount of Each Receipt this Period 265.00
C. Full Name (Last, First, Middle Initial) Charlie Kleiner Mailing Address 546 Churchill Rd. City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 Transaction ID: SA11A1.18610 Amount of Each Receipt this Period 100.00
SUBTOTAL of Receipts This Page (optional) ▶		365.00
TOTAL This Period (last page this line number only) ▶		

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

FOR LINE NUMBER: PAGE 80 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Steven Klinghoffer Mailing Address 33 Wildwood Dr. City State Zip Code Short Hills NJ 07078 FEC ID number of contributing federal political committee. C Name of Employer WPI Communications Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00		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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.17838 Amount of Each Receipt this Period 2500.00	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	7													
B. Full Name (Last, First, Middle Initial) Steven Klinghoffer Mailing Address 33 Wildwood Dr. City State Zip Code Short Hills NJ 07078 FEC ID number of contributing federal political committee. C Name of Employer WPI Communications Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2680.00		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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.17839 Amount of Each Receipt this Period 180.00	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		1	6		2	0	0	7													
C. Full Name (Last, First, Middle Initial) Lawrence Kluger Mailing Address 35 Ellsworth Dr. City State Zip Code Warren NJ 07059 FEC ID number of contributing federal political committee. C Name of Employer self Occupation physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .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>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.19293 Amount of Each Receipt this Period 100.00 check to Ferguson for Congress [MEMO ITEM]	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	5		2	0	0	7													

SUBTOTAL of Receipts This Page (optional)

2680.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 81 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jonathan Kolatch

Mailing Address 115 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

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

Transaction ID: SA11A1.18692

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

B. Mindy Kolatch

Mailing Address 115 Dwight Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ramaz

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

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

Transaction ID: SA11A1.18693

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

C. Arthur Kook

Mailing Address 263 Broad Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ramapo Valley Dental Asso-
c.

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19131

Amount of Each Receipt this Period

250.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Esther Kosoffsky

Mailing Address 19 new dover road

City State Zip Code
 East Brunswick NJ 08816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Chef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.18065

Amount of Each Receipt this Period

100.00

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

Leon Kozak

Mailing Address 280 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.17704

Amount of Each Receipt this Period

5000.00

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

Leon Kozak

Mailing Address 280 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.18883

Amount of Each Receipt this Period

1000.00

check to Mark Pryor for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 83 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Leon Kozak

Mailing Address 280 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19130

Amount of Each Receipt this Period

1000.00

check to Coleman for Sena-
te

[MEMO ITEM]

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

Leon Kozak

Mailing Address 280 Jones Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19224

Amount of Each Receipt this Period

1000.00

check to Durbin for Senate

[MEMO ITEM]

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

Roslyn Kozak

Mailing Address 280 Jones Rd.

City State Zip Code
 Englewood NJ 07632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.17705

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 84 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City	State	Zip Code
Englewood	NJ	07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
noneOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19001

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Roberto Krutiansky

Mailing Address 2373 Broadway
#1701

City	State	Zip Code
New York	NY	10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Graylock CapitalOccupation
Bond Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18583

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Spencer Kupferman

Mailing Address 510-403 Glenwood Ave.

City	State	Zip Code
Raleigh	NC	27603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Global SoftwareOccupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19157

Amount of Each Receipt this Period

250.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 85 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Chani Laifer

Mailing Address 565 Warwick Avenue

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18504

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Emanuel Landau

Mailing Address 1279 Pennington Road

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYC Board of Education

Occupation
School Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19132

Amount of Each Receipt this Period

36.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Emanuel Landau

Mailing Address 1279 Pennington Road

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYC Board of Education

Occupation
School Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19225

Amount of Each Receipt this Period

20.00

check to Durbin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 86 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Joshua Landes

Mailing Address 740 W 232nd Street

City State Zip Code
 Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wynnefield Capital

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19133

Amount of Each Receipt this Period

2000.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Joshua Landes

Mailing Address 740 W 232nd Street

City State Zip Code
 Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wynnefield Capital

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4975.00

Date of Receipt

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

Transaction ID: SA11A1.18685

Amount of Each Receipt this Period

4850.00

Full Name (Last, First, Middle Initial)

C. Joshua Landes

Mailing Address 740 W 232nd Street

City State Zip Code
 Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wynnefield Capital

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18848

Amount of Each Receipt this Period

200.00

check to McCain 2008 Expl-
or

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

4850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 87 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Joshua Landes

Mailing Address 740 W 232nd Street

City State Zip Code
 Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wynnefield Capital

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18849

Amount of Each Receipt this Period

800.00

check to McCain 2008 Expl-
or

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. james Lavin

Mailing Address 483 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
lavin Holdings LLC

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19134

Amount of Each Receipt this Period

500.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Robert Lebovics

Mailing Address 156 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11A1.18442

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 88 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Robert Lebovics

Mailing Address 156 Dwight Pl.

City	State	Zip Code
Englewood	NJ	07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19136

Amount of Each Receipt this Period

500.00

check to Coleman for Sena-
te**[MEMO ITEM]****B.** Full Name (Last, First, Middle Initial)

Jerome Leff

Mailing Address 2665 Netherland Ave

City	State	Zip Code
Bronx	NY	10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Podiatrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	7

Transaction ID: SA11A1.18059

Amount of Each Receipt this Period

265.00

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

Marc Legman

Mailing Address 14 Walker Ave.

City	State	Zip Code
Closter	NJ	07624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grubb & Ellis CompanyOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18270

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 89 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Alden Leifer

Mailing Address 191 Edgemont Place

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19000

Amount of Each Receipt this Period

250.00

credit card to Levin for
Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kevin Lemmer

Mailing Address 140 Downey Dr.

City State Zip Code
 Tenafly NJ 07670

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADAR Investment Management

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18836

Amount of Each Receipt this Period

2100.00

credit card to McCain 2008
Explor

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Kevin Lemmer

Mailing Address 140 Downey Dr.

City State Zip Code
 Tenafly NJ 07670

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADAR Investment Management

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11A1.17748

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Kevin Lemmer Mailing Address 140 Downey Dr. City Tenafly State NJ Zip Code 07670 FEC ID number of contributing federal political committee. C Name of Employer ADAR Investment Management Occupation Financial Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 565.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7 Transaction ID: SA11A1.18169 Amount of Each Receipt this Period 165.00
B. Full Name (Last, First, Middle Initial) Kevin Lemmer Mailing Address 140 Downey Dr. City Tenafly State NJ Zip Code 07670 FEC ID number of contributing federal political committee. C Name of Employer ADAR Investment Management Occupation Financial Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.19137 Amount of Each Receipt this Period 500.00 credit card to Coleman for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Kevin Lemmer Mailing Address 140 Downey Dr. City Tenafly State NJ Zip Code 07670 FEC ID number of contributing federal political committee. C Name of Employer ADAR Investment Management Occupation Financial Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 9 / 2 0 0 7 Transaction ID: SA11A1.19271 Amount of Each Receipt this Period 500.00 credit card to Specter for Senate [MEMO ITEM]
SUBTOTAL of Receipts This Page (optional) ▶			165.00
TOTAL This Period (last page this line number only) ▶			

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

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

FOR LINE NUMBER: PAGE 91 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Lori Lemmer		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 140 Downey Dr.		
City Tenafly	State NJ	Zip Code 07670
FEC ID number of contributing federal political committee. C		Transaction ID: SA11A1.18884
Name of Employer none		Amount of Each Receipt this Period 500.00
Occupation housewife		credit card to Mark Pryor for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ .00		

B. Full Name (Last, First, Middle Initial) Lori Lemmer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 140 Downey Dr.		
City Tenafly	State NJ	Zip Code 07670
FEC ID number of contributing federal political committee. C		Transaction ID: SA11A1.19138
Name of Employer none		Amount of Each Receipt this Period 500.00
Occupation housewife		credit card to Coleman for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]
Aggregate Year-to-Date ▼ .00		

C. Full Name (Last, First, Middle Initial) Barbara Levadi		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 7
Mailing Address 21 Tiffany Drive		
City Livingston	State NJ	Zip Code 07039
FEC ID number of contributing federal political committee. C		Transaction ID: SA11A1.17947
Name of Employer Self		Amount of Each Receipt this Period 225.00
Occupation Writer and publisher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 92 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Sallie Levi

Mailing Address 617 North Forest Drive

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney/Realtor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.18317

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Esther Levie

Mailing Address 814 Downing St

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18536

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Joy Levin

Mailing Address 2 Chestnut Hill Dr.

City State Zip Code
Manalapan NJ 07726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.18689

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

3030.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 93 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Saul Levine

Mailing Address 604 Rutland Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Horizon Project Advisors

Occupation
Construction Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.17755

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. Syma Levine

Mailing Address 491 Bell Street

City State Zip Code
 West Hempstead NY 11552

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18376

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Aviva Levinson

Mailing Address 300 East 71st St
 Apt 14H

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDT Corp

Occupation
Real Estate Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19139

Amount of Each Receipt this Period

200.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

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

Barry Levitt

Mailing Address 35 Farrand Dr.

City State Zip Code
Parsippany NJ 07054

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Levitt's LLC)

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
05 01 2007

Transaction ID: SA11A1.18509

Amount of Each Receipt this Period

265.00

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

Edward Levy

Mailing Address 711 S. Bates Street

City State Zip Code
Birmingham MI 48009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Edw.C.Levy Co.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 26 2007

Transaction ID: SA11A1.18716

Amount of Each Receipt this Period

5000.00

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

Eliane Levy

Mailing Address 27 Prospect Rd

City State Zip Code
Livingston NJ 07039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
01 11 2007

Transaction ID: SA11A1.17699

Amount of Each Receipt this Period

425.00

SUBTOTAL of Receipts This Page (optional)

5690.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

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

Eliane Levy

Mailing Address 27 Prospect Rd

City State Zip Code
 Livingston NJ 07039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18999

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

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

Daniel Lewis

Mailing Address 132 Meadowbrook Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gem Asset Management

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

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

Transaction ID: SA11A1.17944

Amount of Each Receipt this Period

1125.00

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

Daniel Lewis

Mailing Address 132 Meadowbrook Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gem Asset Management

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.19117

Amount of Each Receipt this Period

500.00

credit card to Coleman for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

1125.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

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

Daniel Lewis

Mailing Address 132 Meadowbrook Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gem Asset Management

Occupation
Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3725.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.18708

Amount of Each Receipt this Period

2600.00

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

Jerry Lewkowicz

Mailing Address 140 N. Woodland Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
People Care, Inc.

Occupation
Health care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2165.00

Date of Receipt

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

Transaction ID: SA11A1.18467

Amount of Each Receipt this Period

2000.00

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

Jeffrey Lichtman

Mailing Address 31 Lakeview Drive

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Orthodox Union

Occupation
Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.18612

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)

4965.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Nathan J. Lindenbaum Mailing Address 464 Winthrop Rd. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation MGS Corp. Executive Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 9 / 2 0 0 7 Transaction ID: SA11A1.18882 Amount of Each Receipt this Period 1000.00 check to Mark Pryor for Senate [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Nathan J. Lindenbaum Mailing Address 464 Winthrop Rd. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation MGS Corp. Executive Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.19047 Amount of Each Receipt this Period 1000.00 check to Levin for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Nathan J. Lindenbaum Mailing Address 464 Winthrop Rd. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation MGS Corp. Executive Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.19141 Amount of Each Receipt this Period 1000.00 check to Coleman for Senate [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 98 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Nathan J. Lindenbaum

Mailing Address 464 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
MGS Corp.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19226

Amount of Each Receipt this Period

1000.00

check to Durbin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Harley Lippman

Mailing Address 1021 Park Ave. 7C

City State Zip Code
 New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tech Co.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18440

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Marc Lipschultz

Mailing Address 1021 Park Ave
 #3C

City State Zip Code
 New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kohlberg, Kravis et al

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.19311

Amount of Each Receipt this Period

2000.00

check to Pence for Congress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Roz Lipsky

Mailing Address 28 Lakeview Dr

City State Zip Code
West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Pharmaceutical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
06 15 2007

Transaction ID: SA11A1.18699

Amount of Each Receipt this Period

200.00

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

Yocheved Liss

Mailing Address 3020 Arlington Ave

City State Zip Code
Riverdale NY 10417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
03 25 2007

Transaction ID: SA11A1.18997

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

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

Richard Lobel

Mailing Address 53 Walnut Court

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
04 04 2007

Transaction ID: SA11A1.18168

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

465.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Miriam Lubarr Mailing Address 236 Fountain Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: SA11A1.18410 Amount of Each Receipt this Period 330.00
B. Full Name (Last, First, Middle Initial) Iris Maidenbaum Mailing Address 50 Bayberry Rd City Lawrence State NY Zip Code 11559 FEC ID number of contributing federal political committee. C Name of Employer FCMC Mortgage Corp Occupation Mortgage Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 7 Transaction ID: SA11A1.18694 Amount of Each Receipt this Period 300.00
C. Full Name (Last, First, Middle Initial) Josh Mallin Mailing Address 381 Forest Ave. City Woodmere State NY Zip Code 11598 FEC ID number of contributing federal political committee. C Name of Employer Wegman & Myers Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 8 / 2 0 0 7 Transaction ID: SA11A1.17733 Amount of Each Receipt this Period 225.00

SUBTOTAL of Receipts This Page (optional)

855.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Bernice Manocherian

Mailing Address 135 Central Park West #9NC

City State Zip Code
 New York NY 10023-2465

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate/Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.17694

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Robert Marcus

Mailing Address 464 West Englewood Avenue

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Podiatrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18043

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Joseph Mark

Mailing Address 166 Norma Road

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hambro America Inc.

Occupation
Investment Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18228

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)

1630.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Hillary Markowitz Mailing Address 14 Justin Road City State Zip Code Harrison NY 10528 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7 Transaction ID: SA11A1.18623 Amount of Each Receipt this Period 100.00
B. Full Name (Last, First, Middle Initial) Noel Meltzer Mailing Address 26 Blackburne Ter City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Astra Zeneca Occupation Medical Affairs, PhD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.17900 Amount of Each Receipt this Period 225.00
C. Full Name (Last, First, Middle Initial) Jerome Menkin Mailing Address 232 Hutchinson Rd. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer self Occupation merchant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 7 Transaction ID: SA11A1.18064 Amount of Each Receipt this Period 265.00

SUBTOTAL of Receipts This Page (optional)

590.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Jan Meyer

Mailing Address 1467 Essex Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18995

Amount of Each Receipt this Period

250.00

credit card to Levin for
Senate

[MEMO ITEM]

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

Janice Michaelis

Mailing Address 42 Greenwood Ave

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Congregation B'nai Israel

Occupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11A1.17927

Amount of Each Receipt this Period

325.00

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

Jerome Milch

Mailing Address 629 Thames Boulevard

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Express

Occupation
Market Research Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11A1.17744

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jerome Milch

Mailing Address 629 Thames Boulevard

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Express

Occupation
Market Research Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18994

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Howard Miller

Mailing Address 158 Grand Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paine Webber

Occupation
Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17762

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Samuel Moed

Mailing Address 54 Dana Place

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bristol Myers Squibb

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18993

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Daniel Mondrow

Mailing Address 280 Main St.

City State Zip Code
Metuchen NJ 08840

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17869

Amount of Each Receipt this Period

250.00

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

David Moskovic

Mailing Address 22 Brookfall Road

City State Zip Code
Edison NJ 08810

FEC ID number of contributing
federal political committee.

C

Name of Employer
DTCC

Occupation
Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.18020

Amount of Each Receipt this Period

225.00

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

Milton Moskowitz

Mailing Address 1995 New York Ave.

City State Zip Code
Brooklyn NY 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Electrician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18278

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

740.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) David Moss Mailing Address 321 Grant Avenue City Highland Park State NJ Zip Code 08904 FEC ID number of contributing federal political committee. C Name of Employer Touro College Occupation University Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2007 Transaction ID: SA11A1.17911 Amount of Each Receipt this Period 225.00
B. Full Name (Last, First, Middle Initial) David Muschel Mailing Address 1296 Somerset Rd City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Rockview Management Occupation Money Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 30 / 2007 Transaction ID: SA11A1.19153 Amount of Each Receipt this Period 500.00 credit card to Coleman for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) David Muschel Mailing Address 1296 Somerset Rd City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Rockview Management Occupation Money Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 06 / 07 / 2007 Transaction ID: SA11A1.19161 Amount of Each Receipt this Period 500.00 credit card to Coleman for Senate [MEMO ITEM]
SUBTOTAL of Receipts This Page (optional) ▶		225.00
TOTAL This Period (last page this line number only) ▶		

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-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: SA11A1.18002

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18880

Amount of Each Receipt this Period

1000.00

check to Mark Pryor for
Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1165.00

Date of Receipt

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

Transaction ID: SA11A1.18175

Amount of Each Receipt this Period

165.00

SUBTOTAL of Receipts This Page (optional)

1165.00

TOTAL This Period (last page this line number only)

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

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or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.18790

Amount of Each Receipt this Period

100.00

In-kind - bus driver tip
May DC trip

Full Name (Last, First, Middle Initial)

B. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.19151

Amount of Each Receipt this Period

1000.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jason Muss

Mailing Address 181 East 90th

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Muss Development Corp

Occupation
Real Estate Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.19272

Amount of Each Receipt this Period

1000.00

check to Specter for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 109 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Henry Nadler Mailing Address 231 Hutchinson Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.17996 Amount of Each Receipt this Period 450.00
B. Full Name (Last, First, Middle Initial) Amy Naselsky Attias Mailing Address 15 Royal Park Terrace City Hillsdale State NJ Zip Code 07642 FEC ID number of contributing federal political committee. C Name of Employer Tenafly Chabad Nursery School Occupation Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.18443 Amount of Each Receipt this Period 265.00
C. Full Name (Last, First, Middle Initial) Moshe Nat Mailing Address 32 edgemont road City Edison State NJ Zip Code 08817 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7 Transaction ID: SA11A1.18003 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

965.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Edward Neiger

Mailing Address 258 West 93rd St.
#3A

City State Zip Code
New York NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weil, Gotshal & Manages

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18825

Amount of Each Receipt this Period

500.00

credit card to Giuliani
'08 Pres Cmte

[MEMO ITEM]

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

Edward Neiger

Mailing Address 258 West 93rd St.
#3A

City State Zip Code
New York NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weil, Gotshal & Manages

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.19273

Amount of Each Receipt this Period

300.00

credit card to Specter for
Senate

[MEMO ITEM]

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

Edward Neiger

Mailing Address 258 West 93rd St.
#3A

City State Zip Code
New York NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weil, Gotshal & Manages

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19162

Amount of Each Receipt this Period

250.00

credit card to Coleman for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Tzvi Odzer

Mailing Address 32 Park Circle

City State Zip Code
 Cedarhurst NY 11516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Moss Supplies)

Occupation
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.18709

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Allen Oppenheim

Mailing Address 304 Van Nostrand Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18919

Amount of Each Receipt this Period

100.00

check to Berkley for Cong-
ress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Henry Orlinsky

Mailing Address 586 Sunderland Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18992

Amount of Each Receipt this Period

1000.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Carole Oshinsky Mailing Address 44 Beech Wood Ter City Yonkers State NY Zip Code 10705 FEC ID number of contributing federal political committee. C Name of Employer Nat'l Cntr 4 ChildrenInPo- verty Occupation Editor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.17928 Amount of Each Receipt this Period 350.00
B. Full Name (Last, First, Middle Initial) Rae Paltiel Mailing Address 22 Claremont Avenue City Maplewood State NJ Zip Code 07040 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.18275 Amount of Each Receipt this Period 165.00
C. Full Name (Last, First, Middle Initial) Julie Papier Mailing Address 806 Downing St. City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7 Transaction ID: SA11A1.18607 Amount of Each Receipt this Period 265.00

SUBTOTAL of Receipts This Page (optional)

780.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Shelley Paradis

Mailing Address 35 Mountain Ridge

City State Zip Code
 Livingston NJ 07039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18052

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Drew Parker

Mailing Address 159 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsbrook Investments

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.18881

Amount of Each Receipt this Period

250.00

check to Mark Pryor for
Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Drew Parker

Mailing Address 159 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsbrook Investments

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18930

Amount of Each Receipt this Period

250.00

check to Berkley for Cong-
ress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Drew Parker

Mailing Address 159 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsbrook Investments

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19159

Amount of Each Receipt this Period

250.00

check to Coleman for Sena-
te

[MEMO ITEM]

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

Jeffrey parker

Mailing Address 269 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parker Lamm

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18920

Amount of Each Receipt this Period

150.00

check to Berkley for Cong-
ress

[MEMO ITEM]

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

Ofra Parmett

Mailing Address 572 Warwick Ave

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18990

Amount of Each Receipt this Period

100.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Stephen Paul

Mailing Address 61 Howell Dr.

City State Zip Code
 West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Princeton U

Occupation
Research Physicist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.18033

Amount of Each Receipt this Period

125.00

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

Shai Perry

Mailing Address 125 B E.Palisade Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Geshar Yehudah

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19142

Amount of Each Receipt this Period

250.00

check to Coleman for Sena-
te

[MEMO ITEM]

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

Paul Pheffer

Mailing Address 14 Ely Place

City State Zip Code
 Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18522

Amount of Each Receipt this Period

265.00

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Paul Pizem

Mailing Address 555 Kappock St

City State Zip Code
 Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17860

Amount of Each Receipt this Period

225.00

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

Daniel Posner

Mailing Address 500 West End Ave
 Apt 3A

City State Zip Code
 New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
D.E. Shaw

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.19319

Amount of Each Receipt this Period

1000.00

check to Pence for Congre-
ss

[MEMO ITEM]

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

Simon Posner

Mailing Address 300 Robin Road

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Otterbourg, Steindler

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17968

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Al Ptalis

Mailing Address 12 Old Coach Rd

City State Zip Code
 Randolph NJ 07869

FEC ID number of contributing
federal political committee.

C

Name of Employer
CTX Mortgage Company

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18517

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Isaac Putterman

Mailing Address 473 West End Ave.

City State Zip Code
 New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Computer consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18386

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

C. Rachel Quint

Mailing Address 4515 Greystone

City State Zip Code
 Fieldstone NY 10471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.17846

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)

870.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 118 / 294

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
David Rabinowitz
Mailing Address 83 E. Linden Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
JPMorgan

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18928

Amount of Each Receipt this Period

500.00

check to Berkley for Cong-
ress

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
David Rabinowitz
Mailing Address 83 E. Linden Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
JPMorgan

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19046

Amount of Each Receipt this Period

100.00

credit card to Levin for
Senate

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Penny Rabinowitz
Mailing Address 83 E. Linden Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Event Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18551

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) David Rauch		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 472 Winthrop Rd.		Transaction ID: SA11A1.18921
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer US Wire	Occupation President	check to Berkley for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Harry Reidler		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 263 Hutchinson Rd.		Transaction ID: SA11A1.17747
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer Self	Occupation Attorney	check to Berkley for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C. Full Name (Last, First, Middle Initial) Harry Reidler		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 263 Hutchinson Rd.		Transaction ID: SA11A1.18922
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Attorney	check to Berkley for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 120 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Michael Richmond

Mailing Address 280 Ogden Ave.

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
LaSalle Business CreditOccupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18013

Amount of Each Receipt this Period

265.00

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

Eric Rosen

Mailing Address 390 Churchill Road

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
NY TimesOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18068

Amount of Each Receipt this Period

265.00

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

Jack Rosen

Mailing Address 18 E. 85th St

City	State	Zip Code
New York	NY	10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18687

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 121 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Gene Rosenberg

Mailing Address 507 Forest Avenue

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18989

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

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

David Rosenblatt

Mailing Address 17 York Place

City State Zip Code
 Tenafly NJ 07670

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18539

Amount of Each Receipt this Period

265.00

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

Susan Roemer Rosenfield

Mailing Address 155 w. 70 St.

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Mediator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.18213

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 122 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Joseph Rotenberg

Mailing Address 753 Washburn St

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Merill Lynch

Occupation
Stockbroker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18987

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Ruth Roth

Mailing Address 597 Rutland Ave

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Freelance Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11A1.17738

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

C. Ruth Roth

Mailing Address 597 Rutland Ave

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Freelance Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18923

Amount of Each Receipt this Period

100.00

check to Berkley for Congress

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 123 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Ronald Rubin Mailing Address 3530 Henry Hudson Pkwy Apt 3J City State Zip Code Bronx NY 10463 FEC ID number of contributing federal political committee. C Name of Employer Occupation CUNY Educator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>250.00</div>		Date of Receipt <div>02 / 23 / 2007</div> Transaction ID: SA11A1.17844 Amount of Each Receipt this Period <div>250.00</div>
B. Full Name (Last, First, Middle Initial) David Salomon Mailing Address 716 N. Elm Dr City State Zip Code Beverly Hills CA 90210 FEC ID number of contributing federal political committee. C Name of Employer Occupation EWT, LLC CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>06 / 04 / 2007</div> Transaction ID: SA11A1.19308 Amount of Each Receipt this Period <div>2300.00</div> check to Pence for Congress [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) David Salomon Mailing Address 716 N. Elm Dr City State Zip Code Beverly Hills CA 90210 FEC ID number of contributing federal political committee. C Name of Employer Occupation EWT, LLC CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>		Date of Receipt <div>06 / 04 / 2007</div> Transaction ID: SA11A1.19309 Amount of Each Receipt this Period <div>2300.00</div> check to Pence for Congress [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 124 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jonah Sarasohn

Mailing Address 600 Columbus Ave
Apt 11P

City State Zip Code
New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thomson Financial

Occupation
Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19143

Amount of Each Receipt this Period

50.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bennett Schachter

Mailing Address 43 Dover Court

City State Zip Code
Bergenfield NJ 07621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Goldman Sachs

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19044

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rukhl Schaechter

Mailing Address 52 Ellsworth Ave

City State Zip Code
Yonkers NY 10705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Yiddish Forward

Occupation
Journalist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18170

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 125 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Louis Schapiro		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 271 Sunset Ave.		Transaction ID: SA11A1.18924
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Estee Lauder Corp.	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
		check to Berkley for Congress [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Louis Schapiro		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 271 Sunset Ave.		Transaction ID: SA11A1.18409
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Estee Lauder Corp.	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C. Full Name (Last, First, Middle Initial) Bob Scheingoltz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 2575 Palisade Ave		Transaction ID: SA11A1.18434
City Bronx	State NY	Zip Code 10463
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 126 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Miriam Schenker Mailing Address 464 Maitland Ave City State Zip Code Teaneck NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Office Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 7 Transaction ID: SA11A1.17835 Amount of Each Receipt this Period 450.00
B. Full Name (Last, First, Middle Initial) Stanley Scher Mailing Address 3333 Henry Hudson Pkwy Apt 20 J City State Zip Code Bronx NY 10463 FEC ID number of contributing federal political committee. C Name of Employer none Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.17710 Amount of Each Receipt this Period 250.00
C. Full Name (Last, First, Middle Initial) Marty Schlakman Mailing Address 200 Lyman Pl. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Psychiatry Assoc. Occupation Psychiatrist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 2 / 2 0 0 7 Transaction ID: SA11A1.18258 Amount of Each Receipt this Period 365.00

SUBTOTAL of Receipts This Page (optional)

1065.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 127 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

David Schlusel

Mailing Address 860 Prince St.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing federal political committee.

C

Name of Employer
Key PropertiesOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19227

Amount of Each Receipt this Period

1000.00

check to Durbin for Senate

[MEMO ITEM]

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

Richard Schlusel

Mailing Address 100 Lydecker St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
Mt. Sinai Med CtrOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17726

Amount of Each Receipt this Period

225.00

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

Steven Schlusel

Mailing Address 370 Warwick Avenue

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing federal political committee.

C

Name of Employer
IEMOccupation
Businessman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18350

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

555.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 128 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Manuel Schnaidman

Mailing Address 333 Ogden Ave

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deutsche Bank

Occupation
Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18985

Amount of Each Receipt this Period

250.00

credit card to Levin for
Senate

[MEMO ITEM]

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

Martin Schneider

Mailing Address 19 Harrison St.

City State Zip Code
Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Millennium Eye Care

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17910

Amount of Each Receipt this Period

250.00

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

Jeffrey Schreiber

Mailing Address 208 Lincoln Ave.

City State Zip Code
Highland Park NJ 08904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Meister Seelig & Fe-
in)

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17886

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

475.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 129 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Michael Schulder

Mailing Address 155 W. 68th st. Apt 2015

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
NJ Med School

Occupation
Neurosurgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.18156

Amount of Each Receipt this Period

165.00

Full Name (Last, First, Middle Initial)

B. Gary Schulman

Mailing Address 384 Winthrop Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leo Schachter, LLC

Occupation
sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17833

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Myron Schulman

Mailing Address 540 Warwick Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11A1.18544

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)

755.00

TOTAL This Period (last page this line number only)

FOR LINE NUMBER: (check only one)

X	11a		11b		11c		12		
	13		14		15		16		17

NAME OF COMMITTEE (In Full)
NORPAC

FEC Schedule A (Form 3X) Rev. 02/2003

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

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

FOR LINE NUMBER: PAGE 131 / 294
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Abe Schwartzbard

Mailing Address 9 Fairhill Road

City State Zip Code
Edison NJ 08817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hewlett Packard Financial
Serv

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18383

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Irving Schwarzbaum

Mailing Address 10 Lakeview Drive

City State Zip Code
West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
JH Cohn LLP

Occupation
Accountant/Financial Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18554

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Neill Serman

Mailing Address 750 Kappock St
Apt 108

City State Zip Code
Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.17827

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

615.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 132 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Neill Serman		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 750 Kappock St Apt 108		Transaction ID: SA11A1.19145
City Riverdale	State NY	Zip Code 10463
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.00
Name of Employer Self	Occupation Dentist	check to Coleman for Sena- te [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Marla Shapiro		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 267 Maple St		Transaction ID: SA11A1.18585
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Self	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C. Full Name (Last, First, Middle Initial) Norman Shapiro		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 1325 Fayette Street		Transaction ID: SA11A1.18049
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Self	Occupation Commodity Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)

530.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 133 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Andrew Shechtel

Mailing Address 33 Witherspoon

City State Zip Code
 Princeton NJ 08542

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
financial services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.17798

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Ricky Shechtel

Mailing Address 33 Witherspoon St.

City State Zip Code
 Princeton NJ 08542

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
housewife

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.17799

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Leah Shteingart

Mailing Address 810 East Lawn Drive

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frisch

Occupation
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.18141

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

10100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 134 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Bryna Shuchat
Mailing Address 740 West 232nd St

City State Zip Code
Riverdale NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18684

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Elliot Shulman
Mailing Address 105 Dana Place

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18396

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Yale Shulman
Mailing Address 94 E. Linden Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

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

Transaction ID: SA11A1.18209

Amount of Each Receipt this Period

415.00

SUBTOTAL of Receipts This Page (optional)

5515.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 135 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Eric Sichel Mailing Address 411 Highview Road City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Investment Advisor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.18165 Amount of Each Receipt this Period 265.00
B. Full Name (Last, First, Middle Initial) Jason Silverstein Mailing Address 133A E Palisade Ave City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Bear Stearns Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.19146 Amount of Each Receipt this Period 200.00 check to Coleman for Senate [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Kenneth Simckes Mailing Address 2 Tauber Ter City Monsey State NY Zip Code 10952 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Dentist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 9 / 2 0 0 7 Transaction ID: SA11A1.17759 Amount of Each Receipt this Period 1200.00

SUBTOTAL of Receipts This Page (optional)

1465.00

TOTAL This Period (last page this line number only)

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Barry Sklar		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 95 Norfolk St.		Transaction ID: SA11A1.19152
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Bankers Trust	Occupation Attorney	check to Coleman for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
[MEMO ITEM]		

B. Full Name (Last, First, Middle Initial) Barry Sklar		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 95 Norfolk St.		Transaction ID: SA11A1.18679
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4835.00
Name of Employer Bankers Trust	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) ron slevin		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7
Mailing Address 30 Lancaster Rd.		Transaction ID: SA11A1.19229
City Tenafly	State NJ	Zip Code 07670
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Salomon Smith Barney	Occupation Money manager	check to Durbin for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
[MEMO ITEM]		

SUBTOTAL of Receipts This Page (optional)

4835.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Judy Spiegel

Mailing Address 281 E Linden Ave

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
 0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.18327

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Sander Sruhowitz

Mailing Address 575 North Forest Drive

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sonnenschein Sherman & De-
utch

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18984

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Gail Stechler

Mailing Address 563 Winthrop Road

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Adminstrative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18983

Amount of Each Receipt this Period

1000.00

check to Levin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 138 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Joseph Stechler

Mailing Address 563 Winthrop Rd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stechler & Co. Securities

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19230

Amount of Each Receipt this Period

100.00

check to Durbin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Elliot Steigman

Mailing Address 556 Maitland Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18982

Amount of Each Receipt this Period

200.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Aaron A. Stein

Mailing Address 497 Cumberland Street

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19160

Amount of Each Receipt this Period

150.00

check to Coleman for Sena-
te

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 139 / 294

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) David Stein		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 132 S Adelaide Ave.		Transaction ID: SA11A1.18178
City Highland Park	State NJ	Zip Code 08904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 330.00
Name of Employer Merrill Lynch	Occupation IT Project Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B. Full Name (Last, First, Middle Initial) Martin Stein		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7
Mailing Address 507 Maitland Ave.		Transaction ID: SA11A1.18981
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Parker Duryee Rosoff & Ha- ft	Occupation Attorney	check to Levin for Senate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Marvin Stein		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 47 Derby Avenue		Transaction ID: SA11A1.18381
City Cederhurst	State NY	Zip Code 11516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer VMWare	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 140 / 294

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORPAC

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

David Steinberg

Mailing Address 70-30 137 St.

City	State	Zip Code
Flushing	NY	11367

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Mortgage Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11A1.17859

Amount of Each Receipt this Period

450.00

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

Abe Steinberger

Mailing Address 590 Winthrop Rd

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19332

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

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

David Steiner

Mailing Address Llewellyn Park

City	State	Zip Code
West Orange	NJ	07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Steiner Equities GroupOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	0	7

Transaction ID: SA11A1.17690

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 141 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Harris Sterman
Mailing Address 681 Camperdown Ave

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18967

Amount of Each Receipt this Period

200.00

check to Levin for Senate

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Ronnie Stern
Mailing Address 514 Maitland Ave.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wythe Upholstery Co.

Occupation
Furniture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

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

Transaction ID: SA11A1.18345

Amount of Each Receipt this Period

1265.00

C. Full Name (Last, First, Middle Initial)
Ronnie Stern
Mailing Address 514 Maitland Ave.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wythe Upholstery Co.

Occupation
Furniture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19041

Amount of Each Receipt this Period

1000.00

credit card to Levin for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

1265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 142 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Trudy Stern

Mailing Address 480 ocean ave

City State Zip Code
 Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18206

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Ronald Strobel

Mailing Address 226 Chestnut St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

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

Transaction ID: SA11A1.18351

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Caron Strulowitz

Mailing Address 96 Dwight Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11A1.17995

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)

955.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 143 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Ilona Surick Mailing Address 420 Acorn Drive City State Zip Code Paramus NJ 07652 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.18028 Amount of Each Receipt this Period 275.00
Name of Employer Eisai Inc. Occupation MD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		

B. Full Name (Last, First, Middle Initial) David Suss Mailing Address 3777 Independence Avenue City State Zip Code Bronx NY 10463 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.18513 Amount of Each Receipt this Period 265.00
Name of Employer Self Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		

C. Full Name (Last, First, Middle Initial) Alan Tannenbaum Mailing Address 106 Heights Ln City State Zip Code Tenafly NJ 07670 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.19231 Amount of Each Receipt this Period 500.00 check to Durbin for Senate [MEMO ITEM]
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 144 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Steven Tennenbaum

Mailing Address 500 Warwick Ave

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.**C**Name of Employer
SelfOccupation
Importer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18964

Amount of Each Receipt this Period

250.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Thompson Hotel Associates

Mailing Address 60 Thompson St

City	State	Zip Code
New York	NY	10012

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18850

Amount of Each Receipt this Period

2100.00

L Pomeranc (Partner) check
to McCain '08**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Nahum Twersky

Mailing Address 692 Camperdown Ave.

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.**C**Name of Employer
Twersky CommunicationsOccupation
Marketing Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19040

Amount of Each Receipt this Period

200.00

check to Levin for Senate

[MEMO ITEM]**SUBTOTAL** of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 145 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Lance Warrick Mailing Address 201 West 70th St Apt 21 GH City New York State NY Zip Code 10023 FEC ID number of contributing federal political committee. C Name of Employer UBS Financial Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 06 / 04 / 2007 Transaction ID: SA11A1.19313 Amount of Each Receipt this Period 2000.00 check to Pence for Congress [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Jeff Weber Mailing Address 51 Cherry Lane City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer self Occupation real estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt MM / DD / YYYY 04 / 16 / 2007 Transaction ID: SA11A1.18199 Amount of Each Receipt this Period 265.00
C. Full Name (Last, First, Middle Initial) Arianne Weinberger Mailing Address 1296 Somerset Rd City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 02 / 2007 Transaction ID: SA11A1.19037 Amount of Each Receipt this Period 250.00 credit card to Levin for Senate [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 146 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Leonard Weinberger

Mailing Address 255 Van Nostrand Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hunan Teaneck

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.18319

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

B. Marcia Weinblatt

Mailing Address 465 Winthrop Rd

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
The PreTesting Co

Occupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18963

Amount of Each Receipt this Period

500.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bruce Weinrib

Mailing Address 822 Downing St.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ernst & Young

Occupation
Accountant/Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

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

Transaction ID: SA11A1.18388

Amount of Each Receipt this Period

530.00

SUBTOTAL of Receipts This Page (optional)

795.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 147 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Barry Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 134 Lower North Shore Rd.		Transaction ID: SA11A1.19289
City Branchville	State NJ	Zip Code 07826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer none	Occupation retired	check to Ferguson for Congress [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 3 / 2 0 0 7
Mailing Address 11 Anthony Ave.		Transaction ID: SA11A1.18795
City Edison	State NJ	Zip Code 08820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer James St. Anesthesia	Occupation Physician	In-kind - Congressional faxes
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 0 / 2 0 0 7
Mailing Address 11 Anthony Ave.		Transaction ID: SA11A1.17737
City Edison	State NJ	Zip Code 08820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer James St. Anesthesia	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 148 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11A1.17763

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18839

Amount of Each Receipt this Period

1000.00

check to McCain 2008 Expl-
or

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

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

Transaction ID: SA11A1.17894

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 149 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 11 Anthony Ave.

City	State	Zip Code
Edison	NJ	08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. AnesthesiaOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	7

Transaction ID: SA11A1.18800

Amount of Each Receipt this Period

42.50

In-kind - Email distribut-
ion service**B.** Full Name (Last, First, Middle Initial)
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City	State	Zip Code
Edison	NJ	08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. AnesthesiaOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.63

Date of Receipt

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

Transaction ID: SA11A1.18802

Amount of Each Receipt this Period

63.13

In-kind - printing May DC
trip**C.** Full Name (Last, First, Middle Initial)
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City	State	Zip Code
Edison	NJ	08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. AnesthesiaOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18842

Amount of Each Receipt this Period

1000.00

credit card to McCain 2008
Explor

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

105.63

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 150 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1108.00

Date of Receipt

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

Transaction ID: SA11A1.18797

Amount of Each Receipt this Period

377.37

In-kind - DC trip name ba-
dges

Full Name (Last, First, Middle Initial)

B. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1273.00

Date of Receipt

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

Transaction ID: SA11A1.18284

Amount of Each Receipt this Period

165.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6930.00

Date of Receipt

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

Transaction ID: SA11A1.18804

Amount of Each Receipt this Period

5657.00

In-kind -printing- reimbu-
rsement 7/5/07

SUBTOTAL of Receipts This Page (optional)

6199.37

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 151 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19147

Amount of Each Receipt this Period

1000.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19216

Amount of Each Receipt this Period

1000.00

credit card to Durbin for
Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19267

Amount of Each Receipt this Period

1000.00

credit card to Specter for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 152 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.19287

Amount of Each Receipt this Period

2100.00

check to Ferguson for Con-
gress

[MEMO ITEM]

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

Karen Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Karen's Keepsakes)

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.17687

Amount of Each Receipt this Period

5000.00

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

Karen Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Karen's Keepsakes)

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18871

Amount of Each Receipt this Period

1000.00

check to Mark Pryor for
Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Karen Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Karen's Keepsakes)

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18962

Amount of Each Receipt this Period

500.00

credit card to Levin for
Senate

[MEMO ITEM]

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

Karen Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self (Karen's Keepsakes)

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.19286

Amount of Each Receipt this Period

2100.00

check to Ferguson for Con-
gress

[MEMO ITEM]

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

Rachel Weinstein

Mailing Address 8 Elm St
 #3L

City State Zip Code
 Westfield NJ 07090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homecare America

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.18706

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Sarah Weinstein

Mailing Address 1816 New Hampshire Ave, NW

City State Zip Code
 Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
Precision Management

Occupation
Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.18770

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Walter Weinstein

Mailing Address 11529 Victoria Dr

City State Zip Code
 Boynton Beach FL 33437

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.19290

Amount of Each Receipt this Period

200.00

check to Ferguson for Con-
gress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rachelle Weisberger

Mailing Address 5 Brayton Street

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Artist/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

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

Transaction ID: SA11A1.18166

Amount of Each Receipt this Period

530.00

SUBTOTAL of Receipts This Page (optional)

5530.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. William Weiss

Mailing Address 371 Cumberland Street

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
paperclip software

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18960

Amount of Each Receipt this Period

200.00

check to Levin for Senate

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. William Weiss

Mailing Address 371 Cumberland Street

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
paperclip software

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.19148

Amount of Each Receipt this Period

500.00

check to Coleman for Sena-
te

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Mark Wertenteil

Mailing Address 296 Rutland Avenue

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11A1.18075

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Alvin Wertentheil

Mailing Address 295 Sunset Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18925

Amount of Each Receipt this Period

100.00

check to Berkley for Cong-
ress

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Lisa Wexler

Mailing Address 21 Poplar Plain Rd.

City State Zip Code
 Westport CT 06880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

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

Transaction ID: SA11A1.18151

Amount of Each Receipt this Period

265.00

Full Name (Last, First, Middle Initial)

C. Lisa Wexler

Mailing Address 21 Poplar Plain Rd.

City State Zip Code
 Westport CT 06880

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

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

Transaction ID: SA11A1.18271

Amount of Each Receipt this Period

165.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Mark Wiesen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 5 / 2 0 0 7
Mailing Address 668 North Forest Drive		Transaction ID: SA11A1.18959
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Physician	check to Levin for Senate [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

B. Full Name (Last, First, Middle Initial) Mark Wiesen		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 7
Mailing Address 668 North Forest Drive		Transaction ID: SA11A1.18188
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1165.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1165.00	

C. Full Name (Last, First, Middle Initial) Rena Wiesen		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address 668 North Forest Dr.		Transaction ID: SA11A1.18561
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.00
Name of Employer Stern	Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

SUBTOTAL of Receipts This Page (optional)

1430.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

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

Barry Wolf

Mailing Address 128 N. 8th Ave

City State Zip Code
 Highland Park NJ 08904

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.17906

Amount of Each Receipt this Period

225.00

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

Barry Wolf

Mailing Address 128 N. 8th Ave

City State Zip Code
 Highland Park NJ 08904

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.19294

Amount of Each Receipt this Period

100.00

check to Ferguson for Con-
gress

[MEMO ITEM]

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

Richard Wolf

Mailing Address 20 Swarthmore Rd

City State Zip Code
 Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wolf-Gordon

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.19315

Amount of Each Receipt this Period

2000.00

check to Pence for Congre-
ss

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Steven Wruble Mailing Address 614 maitland Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychiatrist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.17933 Amount of Each Receipt this Period 225.00
B. Full Name (Last, First, Middle Initial) Tim Wuliger Mailing Address 20 Basswood Lane City State Zip Code Moreland Hills OH 44022 FEC ID number of contributing federal political committee. C Name of Employer Mallard Investments Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 8 / 2 0 0 7 Transaction ID: SA11A1.17688 Amount of Each Receipt this Period 2000.00
C. Full Name (Last, First, Middle Initial) Sharon Yedwab Mailing Address 23 Cleveland Terrace City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Passaic High School Occupation Teacher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.18547 Amount of Each Receipt this Period 330.00

SUBTOTAL of Receipts This Page (optional)

2555.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Jill Zarin Mailing Address 401 East 60th St City New York State NY Zip Code 10022 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.18280 Amount of Each Receipt this Period 265.00
B. Full Name (Last, First, Middle Initial) David Zaslowky Mailing Address 31 White Drive City Cedarhurst State NY Zip Code 11516 FEC ID number of contributing federal political committee. C Name of Employer Baker & McKenzie Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.18461 Amount of Each Receipt this Period 265.00
C. Full Name (Last, First, Middle Initial) Sheldon Zelig Mailing Address 175 Maple St. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer self Occupation attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 7 Transaction ID: SA11A1.17990 Amount of Each Receipt this Period 325.00

SUBTOTAL of Receipts This Page (optional)

855.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

NORPAC

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

Sheldon Zelig

Mailing Address 175 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18874

Amount of Each Receipt this Period

200.00

check to Mark Pryor for
Senate

[MEMO ITEM]

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

Sheldon Zelig

Mailing Address 175 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.18926

Amount of Each Receipt this Period

200.00

check to Berkley for Cong-
ress

[MEMO ITEM]

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

Sheldon Zelig

Mailing Address 175 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1325.00

Date of Receipt

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

Transaction ID: SA11A1.18678

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Stanley Zimmerman		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7	
Mailing Address 316 North 8th Ave		Transaction ID: SA11A1.18680	
City Edison	State NJ	Zip Code 08817	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation MD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		
B. Full Name (Last, First, Middle Initial) Edward Zizmor		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7	
Mailing Address 1355 Mercedes St		Transaction ID: SA11A1.19234	
City Teaneck	State NJ	Zip Code 07666	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

check to Durbin for Senate

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

194002.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10936.82

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 7

Transaction ID: SA15.18698

Amount of Each Receipt this Period

2786.43

refund of credit card bal-
ance - see Misc

SUBTOTAL of Receipts This Page (optional)

2786.43

TOTAL This Period (last page this line number only)

2786.43

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

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

FOR LINE NUMBER: PAGE 164 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 560.90		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Transaction ID: SA17.17669 Amount of Each Receipt this Period 545.85 sweep account interest in- come
B. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1186.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Transaction ID: SA17.17683 Amount of Each Receipt this Period 625.10 interest - cd ...91
C. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1609.29		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Transaction ID: SA17.17776 Amount of Each Receipt this Period 423.29 interest - cd ...75

SUBTOTAL of Receipts This Page (optional)

1594.24

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 165 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1627.24

Date of Receipt

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

Transaction ID: SA17.17796

Amount of Each Receipt this Period

17.95

interest income

B. Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2158.43

Date of Receipt

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

Transaction ID: SA17.17797

Amount of Each Receipt this Period

531.19

sweep account interest in-
come

C. Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2178.87

Date of Receipt

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

Transaction ID: SA17.17977

Amount of Each Receipt this Period

20.44

interest income

SUBTOTAL of Receipts This Page (optional)

569.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 166 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2822.86		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 Transaction ID: SA17.17978 Amount of Each Receipt this Period 643.99 sweep account interest in- come
B. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 6757.42		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: SA17.18100 Amount of Each Receipt this Period 3934.56 interest - cd ...19
C. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 6779.29		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7 Transaction ID: SA17.18101 Amount of Each Receipt this Period 21.87 interest income

SUBTOTAL of Receipts This Page (optional)

4600.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 167 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7440.56		Date of Receipt MM / DD / YYYY 04 / 30 / 2007 Transaction ID: SA17.18102 Amount of Each Receipt this Period 661.27 sweep account interest in- come
B. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7447.81		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 Transaction ID: SA17.18422 Amount of Each Receipt this Period 7.25 interest income
C. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 8150.39		Date of Receipt MM / DD / YYYY 05 / 31 / 2007 Transaction ID: SA17.18423 Amount of Each Receipt this Period 702.58 sweep account interest in- come

SUBTOTAL of Receipts This Page (optional)

1371.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 168 / 294

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 11528.33		Date of Receipt MM / DD / YYYY 06 / 30 / 2007 Transaction ID: SA17.18669 Amount of Each Receipt this Period 591.51 interest - cd ...91
B. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 11535.07		Date of Receipt MM / DD / YYYY 06 / 30 / 2007 Transaction ID: SA17.18670 Amount of Each Receipt this Period 6.74 interest income
C. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12205.86		Date of Receipt MM / DD / YYYY 06 / 30 / 2007 Transaction ID: SA17.18671 Amount of Each Receipt this Period 670.79 sweep account interest in- come

SUBTOTAL of Receipts This Page (optional)

1269.04

TOTAL This Period (last page this line number only)

9404.38

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) A.M.L., L.P. Mailing Address 663 Palisade Ave City Cliffside Park State NJ Zip Code 07010 Purpose of Disbursement year 2006 rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17772 Date of Disbursement <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>1</td><td></td><td>0</td><td>1</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>1200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	1		2	0	0	7	1200.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		0	1		2	0	0	7														
1200.00																							
B. Full Name (Last, First, Middle Initial) ADP Benefit Services Mailing Address 4900 University Ave - MS14 City West Des Moines State IA Zip Code 50266 Purpose of Disbursement health insur - Davidson Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17674 Date of Disbursement <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>1</td><td></td><td>0</td><td>9</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>350.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	7	350.94
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		0	9		2	0	0	7														
350.94																							
C. Full Name (Last, First, Middle Initial) ADP Benefit Services Mailing Address 4900 University Ave - MS14 City West Des Moines State IA Zip Code 50266 Purpose of Disbursement health insur - Davidson Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.17783 Date of Disbursement <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>350.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	0	7	350.94
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		0	8		2	0	0	7														
350.94																							

SUBTOTAL of Disbursements This Page (optional)

1901.88

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. ADP Benefit Services

Mailing Address 4900 University Ave - MS14

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
health insur - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.18087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.94

Full Name (Last, First, Middle Initial)

B. ADP Benefit Services

Mailing Address 4900 University Ave - MS14

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
health insur - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.18111

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.94

Full Name (Last, First, Middle Initial)

C. ADP Benefit Services

Mailing Address 4900 University Ave - MS14

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
health insur - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.18646

Date of Disbursement

/ /

Amount of Each Disbursement this Period

350.94

SUBTOTAL of Disbursements This Page (optional)

1052.82

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. ADP Benefit Services

Mailing Address 4900 University Ave - MS14

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
health insur - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.18733

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

350.94

Full Name (Last, First, Middle Initial)

B. AIPAC

Mailing Address 440 First St NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement
cc - Policy Conference registration

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.19348

Date of Disbursement

01 / 25 / 2007

Amount of Each Disbursement this Period

399.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code
West Orange NJ 07052

Purpose of Disbursement
In-kind - bus parking May DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: SB21B.18809

Date of Disbursement

05 / 09 / 2007

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)

370.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Barbara Bortniker		Transaction ID: SB21B.18811 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 9 / 2 0 0 7</div> </div>
Mailing Address 4 Kinzel Lane		Amount of Each Disbursement this Period <div>76.00</div>
City West Orange State NJ Zip Code 07052		
Purpose of Disbursement In-kind - coffee West Orange bus DC trip	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Capitol Advantage Publishing		Transaction ID: SB21B.19344 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 7</div> </div>
Mailing Address PO Box 2018		Amount of Each Disbursement this Period <div>711.45</div>
City Merrifield State VA Zip Code 22116		
Purpose of Disbursement cc - Congressional Handbooks for DC trip	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Coach USA		Transaction ID: SB21B.18127 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 7</div> </div>
Mailing Address 160 South Rt 17 North		Amount of Each Disbursement this Period <div>16545.00</div>
City Paramus State NJ Zip Code 07652		
Purpose of Disbursement Buses for May DC Mission	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

16621.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Coach USA		Transaction ID: SB21B.18128 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 7</div> </div>
Mailing Address 160 South Rt 17 North		Amount of Each Disbursement this Period <div>3300.00</div>
City Paramus State NJ Zip Code 07652		
Purpose of Disbursement Additional buses for May DC Mission	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Coach USA		Transaction ID: SB21B.18638 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 0 7</div> </div>
Mailing Address 160 South Rt 17 North		Amount of Each Disbursement this Period <div>3545.00</div>
City Paramus State NJ Zip Code 07652		
Purpose of Disbursement additional buses for May DC trip	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jeffrey Daube		Transaction ID: SB21B.18767 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 7</div> </div>
Mailing Address 4616 Arlington Ave.		Amount of Each Disbursement this Period <div>220.00</div>
City Riverdale State NY Zip Code 10471		
Purpose of Disbursement reimburse tips 2 bus drivers May DC trip	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

7065.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Jeffrey Daube		Transaction ID: SB21B.18768 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 7</div> </div>	
Mailing Address 4616 Arlington Ave.		Amount of Each Disbursement this Period <div>90.85</div>	
City Riverdale State NY Zip Code 10471	Purpose of Disbursement reimburse postage/supplies May DC trip	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Joel Davidson		Transaction ID: SB21B.18744 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 7</div> </div>	
Mailing Address 25 Ellen Drive		Amount of Each Disbursement this Period <div>299.08</div>	
City Rockaway State NJ Zip Code 07866	Purpose of Disbursement reimburse April/May travel	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Joel Davidson		Transaction ID: SB21B.18745 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 7</div> </div>	
Mailing Address 25 Ellen Drive		Amount of Each Disbursement this Period <div>711.45</div>	
City Rockaway State NJ Zip Code 07866	Purpose of Disbursement reimburse Congressional Handbooks	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1101.38

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Joel Davidson		Transaction ID: SB21B.18746 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 7</div> </div>
Mailing Address 25 Ellen Drive		Amount of Each Disbursement this Period <div>86.02</div>
City Rockaway State NJ Zip Code 07866		
Purpose of Disbursement reimburse postage and supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) FedEx Kinko's		Transaction ID: SB21B.19343 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 4 / 2 0 0 7</div> </div>
Mailing Address 166 Linwood Plaza		Amount of Each Disbursement this Period <div>946.71</div>
City Fort Lee State NJ Zip Code 07024		
Purpose of Disbursement Leon Kozak's printing expense line 21(b)		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) Foremost Caterers, Inc		Transaction ID: SB21B.18748 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 7 / 2 0 0 7</div> </div>
Mailing Address 65 Anderson Ave		Amount of Each Disbursement this Period <div>321.75</div>
City Moonachie State NJ Zip Code 07074		
Purpose of Disbursement NYC bus breakfast May DC trip		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

407.77

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Morton Fridman		Transaction ID: SB21B.18780 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 9 / 2 0 0 7</div> </div>
Mailing Address 826 Winthrop Rd		Amount of Each Disbursement this Period <div>300.00</div>
City Teaneck State NJ Zip Code 07666		
Purpose of Disbursement In-kind - bus driver tips May DC trip	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Geico		Transaction ID: SB21B.17780 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 7</div> </div>
Mailing Address 1 Geico Plaza		Amount of Each Disbursement this Period <div>1000.00</div>
City Bethesda State MD Zip Code 20810		
Purpose of Disbursement reimburse travel insurance Davidson	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Anne Gontownik		Transaction ID: SB21B.18765 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 2 / 2 0 0 7</div> </div>
Mailing Address 250 Mountain Rd.		Amount of Each Disbursement this Period <div>485.14</div>
City Englewood State NJ Zip Code 07631		
Purpose of Disbursement reimburse April breakfast for DC training	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>1785.14</div>
TOTAL This Period (last page this line number only)		

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Jerry Gontownik		Transaction ID: SB21B.18117 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 6 / 2 0 0 7</div> </div>
Mailing Address 250 Mountain Rd.		Amount of Each Disbursement this Period <div>1200.00</div>
City Englewood State NJ Zip Code 07631		
Purpose of Disbursement reimburse 2/24/07 purchase NORPAC kippot	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Charles Gross		Transaction ID: SB21B.18130 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 5 / 2 0 0 7</div> </div>
Mailing Address 220 West 98th St #9D		Amount of Each Disbursement this Period <div>500.00</div>
City New York State NY Zip Code 10025		
Purpose of Disbursement Training videos for May DC Mission	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Internal Revenue Service		Transaction ID: SB21B.18086 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 7</div> </div>
Mailing Address N/A		Amount of Each Disbursement this Period <div>2958.00</div>
City Ogden State UT Zip Code 84201		
Purpose of Disbursement IRS taxes for deposit in bank	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

4658.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Jewish State

Mailing Address 320 Raritan Ave. Ste 203

City Highland Park State NJ Zip Code 08904

Purpose of Disbursement
Ad for May DC Mission

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.18133

Date of Disbursement

/ /

Amount of Each Disbursement this Period

280.00

Full Name (Last, First, Middle Initial)

B. Jewish Voice

Mailing Address Dana Place

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
April ad for May DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.18747

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C. Kosher Mart

Mailing Address 4860 Boiling Brook Parkway

City Rockville State MD Zip Code 20852

Purpose of Disbursement
Meals for May DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB21B.18131

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6794.44

SUBTOTAL of Disbursements This Page (optional)

7524.44

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Kosher Mart		Transaction ID: SB21B.18750 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 8 / 2 0 0 7</div> </div>
Mailing Address 4860 Boiling Brook Parkway		Amount of Each Disbursement this Period <div>12019.98</div>
City Rockville State MD Zip Code 20852		
Purpose of Disbursement remainder meals for May DC trip		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Leon Kozak		Transaction ID: SB21B.19336 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 7</div> </div>
Mailing Address 280 Jones Rd.		Amount of Each Disbursement this Period <div>946.71</div>
City Englewood State NJ Zip Code 07631		
Purpose of Disbursement Reimburse printing over '07 limit		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Leon Kozak		Transaction ID: SB21B.19337 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 7</div> </div>
Mailing Address 280 Jones Rd.		Amount of Each Disbursement this Period <div>100.00</div>
City Englewood State NJ Zip Code 07631		
Purpose of Disbursement Reimburse May bus tip over '07 limit		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

13066.69

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Long Island Jewish World		Transaction ID: SB21B.18125 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 0 7</div> </div>
Mailing Address 1525 Central Ave		Amount of Each Disbursement this Period <div>800.00</div>
City Far Rockaway State NY Zip Code 11691		
Purpose of Disbursement 4/13/07 ad for May DC Mission		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Maadan		Transaction ID: SB21B.18660 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 1 / 2 0 0 7</div> </div>
Mailing Address 446 Cedar Lane		Amount of Each Disbursement this Period <div>2562.00</div>
City Teaneck State NJ Zip Code 07666		
Purpose of Disbursement Teaneck bus breakfasts May DC trip		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Monsey Tours		Transaction ID: SB21B.18113 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 0 7</div> </div>
Mailing Address 870 Dean St		Amount of Each Disbursement this Period <div>1817.30</div>
City Brooklyn State NY Zip Code 11238		
Purpose of Disbursement Long Island bus for May Mission		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

5179.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Monsey Tours

Mailing Address 870 Dean St

City Brooklyn State NY Zip Code 11238

Purpose of Disbursement
additional buses for May DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18639

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

3955.00

Full Name (Last, First, Middle Initial)

B. NJ Jewish Media Group

Mailing Address 1086 Teaneck Rd.

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
3/30/07 ad for May DC Mission

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18115

Date of Disbursement

04 / 06 / 2007

Amount of Each Disbursement this Period

458.25

Full Name (Last, First, Middle Initial)

C. NJ Jewish Media Group

Mailing Address 1086 Teaneck Rd.

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
4/13/07 ad for May DC Mission

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18116

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

458.25

SUBTOTAL of Disbursements This Page (optional)

4871.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. NJ Jewish News

Mailing Address 901 Route 10

City Whippany State NJ Zip Code 07981

Purpose of Disbursement
4/12/07 ad for May DC Mission

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18129

Date of Disbursement

/ /

Amount of Each Disbursement this Period

570.50

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17675

Date of Disbursement

/ /

Amount of Each Disbursement this Period

120.72

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17676

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

SUBTOTAL of Disbursements This Page (optional)

2027.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17677

Date of Disbursement

/ /

Amount of Each Disbursement this Period

598.15

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17678

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17679

Date of Disbursement

/ /

Amount of Each Disbursement this Period

598.15

SUBTOTAL of Disbursements This Page (optional)

2532.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17777

Date of Disbursement

/ /

Amount of Each Disbursement this Period

169.35

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Nunez

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17778

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.91

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17782

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

SUBTOTAL of Disbursements This Page (optional)

1604.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17784

Date of Disbursement

/ /

Amount of Each Disbursement this Period

325.79

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17785

Date of Disbursement

/ /

Amount of Each Disbursement this Period

598.15

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Shusteris

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17786

Date of Disbursement

/ /

Amount of Each Disbursement this Period

446.95

SUBTOTAL of Disbursements This Page (optional)

1370.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17787

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

262.97

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17788

Date of Disbursement

02 / 16 / 2007

Amount of Each Disbursement this Period

86.13

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17789

Date of Disbursement

02 / 22 / 2007

Amount of Each Disbursement this Period

1336.00

SUBTOTAL of Disbursements This Page (optional)

1685.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17790

Date of Disbursement

/ /

Amount of Each Disbursement this Period

598.15

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

298.14

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Leonor

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18077

Date of Disbursement

/ /

Amount of Each Disbursement this Period

89.92

SUBTOTAL of Disbursements This Page (optional)

986.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

584.92

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

224.83

SUBTOTAL of Disbursements This Page (optional)

2145.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

293.82

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

453.67

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Shusteris

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18085

Date of Disbursement

/ /

Amount of Each Disbursement this Period

401.49

SUBTOTAL of Disbursements This Page (optional)

1148.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18089

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18091

Date of Disbursement

/ /

Amount of Each Disbursement this Period

584.30

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18104

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

SUBTOTAL of Disbursements This Page (optional)

3256.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Shusteris

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18105

Date of Disbursement

/ /

Amount of Each Disbursement this Period

277.20

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Nunez

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18106

Date of Disbursement

/ /

Amount of Each Disbursement this Period

125.89

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Nunez

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18107

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.61

SUBTOTAL of Disbursements This Page (optional)

510.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

177.12

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18110

Date of Disbursement

/ /

Amount of Each Disbursement this Period

584.30

SUBTOTAL of Disbursements This Page (optional)

2097.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

702.25

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Nunez

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18635

Date of Disbursement

/ /

Amount of Each Disbursement this Period

107.91

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18636

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

SUBTOTAL of Disbursements This Page (optional)

2146.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18637

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2007

Amount of Each Disbursement this Period

1021.80

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18668

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2007

Amount of Each Disbursement this Period

177.36

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Shusteris

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18642

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2007

Amount of Each Disbursement this Period

566.83

SUBTOTAL of Disbursements This Page (optional)

1765.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 195 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18643

Date of Disbursement

05 / 17 / 2007

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18644

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

724.36

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Shusteris

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18656

Date of Disbursement

05 / 25 / 2007

Amount of Each Disbursement this Period

435.45

SUBTOTAL of Disbursements This Page (optional)

2495.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18726

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18727

Date of Disbursement

/ /

Amount of Each Disbursement this Period

584.30

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Leonor

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18728

Date of Disbursement

/ /

Amount of Each Disbursement this Period

233.80

SUBTOTAL of Disbursements This Page (optional)

2154.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 197 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18729

Date of Disbursement

/ /

Amount of Each Disbursement this Period

56.75

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18730

Date of Disbursement

/ /

Amount of Each Disbursement this Period

373.75

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

597.54

SUBTOTAL of Disbursements This Page (optional)

1028.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
service charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18732

Date of Disbursement

/ /

Amount of Each Disbursement this Period

184.21

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18735

Date of Disbursement

/ /

Amount of Each Disbursement this Period

781.82

SUBTOTAL of Disbursements This Page (optional)

2302.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidovics

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18738

Date of Disbursement

/ /

Amount of Each Disbursement this Period

573.56

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18741

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1336.00

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Wolkowitz

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18742

Date of Disbursement

/ /

Amount of Each Disbursement this Period

633.50

SUBTOTAL of Disbursements This Page (optional)

2543.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Paychex		Transaction ID: SB21B.18743 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 1551 S. Washington Ave.		Amount of Each Disbursement this Period <div>821.34</div>
City Piscataway State NJ Zip Code 08854		
Purpose of Disbursement taxes	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) paypal		Transaction ID: SB21B.17671 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 45950		Amount of Each Disbursement this Period <div>266.39</div>
City Omaha State NE Zip Code 68145		
Purpose of Disbursement processing fee	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) paypal		Transaction ID: SB21B.17794 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 7</div> </div>
Mailing Address PO Box 45950		Amount of Each Disbursement this Period <div>554.06</div>
City Omaha State NE Zip Code 68145		
Purpose of Disbursement processing fee	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1641.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 201 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) paypal		Transaction ID: SB21B.17979 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 45950		Amount of Each Disbursement this Period <div>267.78</div>
City Omaha State NE Zip Code 68145		
Purpose of Disbursement processing fee Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) paypal		Transaction ID: SB21B.18257 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 7</div> </div>
Mailing Address PO Box 45950		Amount of Each Disbursement this Period <div>1110.09</div>
City Omaha State NE Zip Code 68145		
Purpose of Disbursement processing fee Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) paypal		Transaction ID: SB21B.18420 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 1 / 2 0 0 7</div> </div>
Mailing Address PO Box 45950		Amount of Each Disbursement this Period <div>523.30</div>
City Omaha State NE Zip Code 68145		
Purpose of Disbursement processing fee Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

1901.17

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 202 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.18673 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>0.88</div>
B. Full Name (Last, First, Middle Initial) Rockaway BP Mailing Address 51 Hibernia Ave City Rockaway State NJ Zip Code 07866 Purpose of Disbursement cc - gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.19353 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>19.25</div>
C. Full Name (Last, First, Middle Initial) Rockaway BP Mailing Address 51 Hibernia Ave City Rockaway State NJ Zip Code 07866 Purpose of Disbursement cc - gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.19358 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 0 / 2 0 0 7</div> </div> Amount of Each Disbursement this Period <div>58.15</div>

[MEMO ITEM]

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.88

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19360

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

153.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19363

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

108.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19368

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 204 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Rockaway BP

Mailing Address 51 Hibernia Ave

City Rockaway State NJ Zip Code 07866

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19372

Date of Disbursement

/ /

Amount of Each Disbursement this Period

85.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19352

Date of Disbursement

/ /

Amount of Each Disbursement this Period

41.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19357

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 205 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19369

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

67.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19365

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

227.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Triangle Exxon

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - gas

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19373

Date of Disbursement

07 / 03 / 2007

Amount of Each Disbursement this Period

57.88

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. US Congress Handbook

Mailing Address PO Box 333

City State Zip Code
Boys MD 20841

Purpose of Disbursement
cc - Congressional handbooks for DC trip
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.19361

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1315.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
credit card close date 1/8/07
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17774

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2479.30

Full Name (Last, First, Middle Initial)

C. Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
credit card processing fee
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17670

Date of Disbursement

/ /

Amount of Each Disbursement this Period

555.80

SUBTOTAL of Disbursements This Page (optional)

3035.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card closing 2/6/07

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17975

Date of Disbursement

/ /

Amount of Each Disbursement this Period

404.39

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17795

Date of Disbursement

/ /

Amount of Each Disbursement this Period

444.83

Full Name (Last, First, Middle Initial)

C. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card closing 3/6/07

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18088

Date of Disbursement

/ /

Amount of Each Disbursement this Period

236.77

SUBTOTAL of Disbursements This Page (optional)

1085.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17976

Date of Disbursement

03 / 31 / 2007

Amount of Each Disbursement this Period

226.93

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
payment transfer -- see Misc amended

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18255

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

3150.00

Full Name (Last, First, Middle Initial)

C. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card closing 4/6/07

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18123

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

1557.55

SUBTOTAL of Disbursements This Page (optional)

4934.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18103

Date of Disbursement

/ /

Amount of Each Disbursement this Period

71.58

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18421

Date of Disbursement

/ /

Amount of Each Disbursement this Period

82.86

Full Name (Last, First, Middle Initial)

C. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card closing 6/5/07

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18772

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.70

SUBTOTAL of Disbursements This Page (optional)

207.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
credit card processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18672

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2007

Amount of Each Disbursement this Period

152.72

Full Name (Last, First, Middle Initial)

B. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17680

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2007

Amount of Each Disbursement this Period

227.11

Full Name (Last, First, Middle Initial)

C. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.17791

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2007

Amount of Each Disbursement this Period

166.15

SUBTOTAL of Disbursements This Page (optional)

545.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

166.77

Full Name (Last, First, Middle Initial)

B. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18122

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.61

Full Name (Last, First, Middle Initial)

C. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.18655

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.61

SUBTOTAL of Disbursements This Page (optional)

501.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18740

Date of Disbursement

06 / 26 / 2007

Amount of Each Disbursement this Period

88.25

Full Name (Last, First, Middle Initial)

B. Walgreens

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - photos

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19355

Date of Disbursement

01 / 25 / 2007

Amount of Each Disbursement this Period

6.21

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Walgreens

Mailing Address 2151 Lemoine Ave

City Fort Lee State NJ Zip Code 07024

Purpose of Disbursement
cc - photos

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19359

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

23.39

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

88.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 213 / 294

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Walgreens Full Name (Last, First, Middle Initial) Mailing Address 2151 Lemoine Ave City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement cc - photos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.19364 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Amount of Each Disbursement this Period 16.87 [MEMO ITEM]
B. Walgreens Full Name (Last, First, Middle Initial) Mailing Address 2151 Lemoine Ave City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement cc - photos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.19367 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7 Amount of Each Disbursement this Period 11.48 [MEMO ITEM]
C. Walgreens Full Name (Last, First, Middle Initial) Mailing Address 2151 Lemoine Ave City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement cc - photos Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.19366 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 33.48 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶		0.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Walgreens

Mailing Address 2151 Lemoine Ave

City State Zip Code
Fort Lee NJ 07024

Purpose of Disbursement
cc - photos

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.19374

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2007

Amount of Each Disbursement this Period

30.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Washington Court Hotel

Mailing Address 525 New Jersey Ave, NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement
Hotel deposit for May 9 convention

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18078

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Washington Court Hotel

Mailing Address 525 New Jersey Ave, NW

City State Zip Code
Washington DC 20001

Purpose of Disbursement
May DC trip hotel expenses

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18640

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2007

Amount of Each Disbursement this Period

14359.30

SUBTOTAL of Disbursements This Page (optional)

15859.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Washington Court Hotel

Mailing Address 525 New Jersey Ave, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
podium/mic service for May DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18641

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

433.70

Full Name (Last, First, Middle Initial)

B. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

Purpose of Disbursement
In-kind - Congressional faxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18796

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

Purpose of Disbursement
In-kind - Email distribution service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.18801

Date of Disbursement

03 / 18 / 2007

Amount of Each Disbursement this Period

42.50

SUBTOTAL of Disbursements This Page (optional)

776.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Transaction ID: SB21B.18803 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 1 / 2 0 0 7</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>63.13</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind - printing May DC trip	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Transaction ID: SB21B.18798 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 0 7</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>377.37</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind - DC trip name badges	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Transaction ID: SB21B.18805 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 1 / 2 0 0 7</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>5657.00</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind -printing- reimbursement 7/5/07	<input type="text"/>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>6097.50</div>	
TOTAL This Period (last page this line number only)		<div>136081.95</div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
credit card from Laurie Baumele

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18934

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Deborah Berger

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18935

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Hannah-Jean Brafman

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18936

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Lisa Brukner

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18937

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
credit card from Jeffrey Daube

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18938

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Susan Fishbein Druck

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18939

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Kenneth Eckstein

Candidate Name
Berkley for Congress

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18940

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
credit card from Reuven Escott

Candidate Name
Berkley for Congress

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18941

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Mark Finkel

Candidate Name
Berkley for Congress

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18942

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

360.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Tom Gessler

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18943

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Anne Gontownik

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18944

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Robert Gottesman

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18945

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Allen Oppenheim

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18946

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Jeffrey Parker

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18947

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from David Rauch

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18948

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Harry Reidler

Candidate Name
SHELLEY BERKLEY

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18949

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Ruth Roth

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18950

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Louis Schapiro

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18951

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Alvin Wertentheil

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18952

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Sheldon Zelig

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18953

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18954

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement

011
Category/
Type

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18665

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from David Rabinowitz

011
Category/
Type

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18955

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Cookie Fishel

011
Category/
Type

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.18956

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from Drew Parker

Candidate Name
Berkley for Congress

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18957

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Berkley for Congress

Mailing Address 3069 CONQUISTA COURT

City LAS VEGAS State NV Zip Code 89121

Purpose of Disbursement
check from David Foni

Candidate Name
SHELLEY BERKLEY

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 01

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18958

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Jeffrey Weinstein

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

State: PA District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19278

Date of Disbursement

06 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Marc Berger

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19279

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19280

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Robert Gottesman

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19281

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Kevin Lemmer

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19282

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jason Muss

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19283

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Edward Neiger

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.19284

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR ARLEN SPECTER

Mailing Address 426 C STREET NE
CARRIAGE HOUSE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Ben Chouake

Candidate Name
CITIZENS FOR ARLEN SPECTER

Office Sought: ☐ House
☒ Senate
☐ President

State: PA District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19285

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Daniel Lewis

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19163

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Howard Baruch

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19164

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jordan Comet

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19165

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Rochelle Dweck

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19166

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Hershel Feldman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19167

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

360.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Daniel Feuer

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19168

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Richard Friend

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19169

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jerry Gontownik

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19173

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Robert Goodman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19174

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Norman Gorlyn

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19178

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Robert Gottesman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19180

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Aryeh Klahr

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19181

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Arthur Kook

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19182

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Leon Kozak

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19184

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Emanuel Landau

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19185

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

36.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Joshua Landes

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19186

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from James Lavin

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19187

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Robert Lebovics

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19188

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Kevin Lemmer

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19189

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Lori Lemmer

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19190

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Aviva Levinson

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19191

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Nathan Lindenbaum

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19192

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Shai Perry

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19193

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jonah Sarasohn

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19194

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Neill Serman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19195

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

54.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jason Silverstein

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19196

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jeffrey Weinstein

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19197

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from William Weiss

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19198

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19199

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Ben Chouake

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19200

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Jason Muss

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19201

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Barry Sklar

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19202

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement

011
Category/
Type

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.18667

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from David Muschel

011
Category/
Type

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19203

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Marc Berger

011
Category/
Type

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19204

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Alan Berger

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19205

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Lawrence Diener

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19207

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Spencer Kupferman

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Transaction ID: SB23.19210

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Frederick Horowitz

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19211

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Drew Parker

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19212

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
check from Aaron Stein

Candidate Name
COLEMAN FOR SENATE 08

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19213

Date of Disbursement

06 / 06 / 2007

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from David Muschel

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.19214

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. COLEMAN FOR SENATE 08

Mailing Address 570 ASBURY STREET SUITE 201A

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement
credit card from Edward Neiger

Candidate Name
COLEMAN FOR SENATE 08

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.19215

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Jeff Weinstein

Candidate Name
DURBIN FOR SENATE

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.19242

Date of Disbursement

06 / 07 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Ivan Bresgi

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19243

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

360.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Leonard David

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19244

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Mark Druck

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19245

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19247

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Toby Glyck

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19248

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Reuben Gross

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19249

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Richard Kahn

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19250

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Leon Kozak

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19251

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Emanuel Landau

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19252

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Nathan Lindenbaum

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19253

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from David Schlusell

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19254

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Myron Schulman

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19255

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Ron Slevin

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19256

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Joseph Stechler

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19257

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Alan Tannenbaum

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19258

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Edward Zizmor

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19259

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19260

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Robert Goodman

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19261

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

2300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Sarah Goodman

Candidate Name
DURBIN FOR SENATE

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.19262

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

2300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Robert Goodman

Candidate Name
DURBIN FOR SENATE

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.19263

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

1700.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Sarah Goodman

Candidate Name
DURBIN FOR SENATE

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 00

Transaction ID: SB23.19264

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

1700.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
credit card from Charles Gershbaum

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19265

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18757

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. DURBIN FOR SENATE

Mailing Address PO BOX 6161

City CHICAGO State IL Zip Code 60680

Purpose of Disbursement
check from Robert Gottesman

Candidate Name
DURBIN FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: IL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19266

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

<p>Full Name (Last, First, Middle Initial) A. FERGUSON FOR CONGRESS</p> <p>Mailing Address 930 STUYVESANT AVE #17</p> <p>City UNION State NJ Zip Code 07083</p> <p>Purpose of Disbursement</p> <p>Candidate Name FERGUSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB23.18096 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>Full Name (Last, First, Middle Initial) B. FERGUSON FOR CONGRESS</p> <p>Mailing Address 930 STUYVESANT AVE #17</p> <p>City UNION State NJ Zip Code 07083</p> <p>Purpose of Disbursement check from Karen Weinstein</p> <p>Candidate Name FERGUSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB23.19298 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p>[MEMO ITEM]</p>
<p>Full Name (Last, First, Middle Initial) C. FERGUSON FOR CONGRESS</p> <p>Mailing Address 930 STUYVESANT AVE #17</p> <p>City UNION State NJ Zip Code 07083</p> <p>Purpose of Disbursement check from Jeffrey Weinstein</p> <p>Candidate Name FERGUSON FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: SB23.19299 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2100.00"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NORPAC

A. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Barry Weinstein Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19300 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 600.00 [MEMO ITEM]
B. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Walter Weinstein Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19301 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]
C. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Harry Bernstein Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19302 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Marc Hanfling Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19303 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
B. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Lawrence Kluger Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19304 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
C. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Barry Wolf Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19305 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Muriel Blum Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19306 Date of Disbursement 06 / 25 / 2007 Amount of Each Disbursement this Period 50.00 [MEMO ITEM]
B. FERGUSON FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address 930 STUYVESANT AVE #17 City UNION State NJ Zip Code 07083 Purpose of Disbursement check from Barbara Bortniker Candidate Name FERGUSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19297 Date of Disbursement 06 / 27 / 2007 Amount of Each Disbursement this Period 100.00 [MEMO ITEM]
C. FRIENDS OF SENATOR CARL LEVIN Full Name (Last, First, Middle Initial) Mailing Address 10 G STREET NE, SUITE 470 City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement check from Abe Steinberger Candidate Name FRIENDS OF SENATOR CARL LEVIN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.18971 Date of Disbursement 03 / 25 / 2007 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Harris Sterman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18972

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Steven Tennenbaum

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18973

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Marcia Weinblatt

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18974

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Karen Weinstein

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18975

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from William Weiss

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18976

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Mark Wiesen

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18977

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Martin Stein

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19060

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Elliot Steigman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19061

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Gail Stechler

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19062

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Sander Srulowitz

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19063

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Manuel Schnaidman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19064

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Joseph Rotenberg

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19065

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Gene Rosenberg

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19066

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Ofra Parmett

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19067

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Henry Orlinsky

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Samuel Moed

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19069

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jerome Milch

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19070

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Jan Meyer

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19071

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Yocheved Liss

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19072

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Eliane Levy

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19073

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Alden Leifer

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19075

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Abraham Kramer

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19076

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Aaron Kinderlehrer

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19077

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

260.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Moshe Kinderlehrer

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19078

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Lester Katz

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Michael Kastner

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Judith Heicklen

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jack Halpern

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Reuben Gross

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19083

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Martin Greenwald

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Alan Greenspan

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19085

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jason Greenblatt

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19086

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Robert Goodman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Aryeh Glatter

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19088

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from David Fishel

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19089

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Charles Feldman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Reuven Escott

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19091

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19092

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Ephraim Casper

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19093

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Hannah-Jean Brafman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19094

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Gail Billig

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19095

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Morris Bienenfeld

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19096

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Howard Baruch

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19097

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Barry Badner

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19098

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jeffrey Ashenberg

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19099

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Emanuel Adler

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19100

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19101

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.18098

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Arianne Weinberger

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19102

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Nachum Twersky

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19103

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Ronnie Stern

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19104

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Bennett Schachter

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19105

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from David Rabinowitz

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19106

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Nathan Lindenbaum

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19107

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Philip Kazlow

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19108

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Avi Katz

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Lawrence Jaffe

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19110

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Steven Grodtko

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19111

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
credit card from Leonard Fuld

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19112

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Jerald Friedman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19113

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Samuel Friedman

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19114

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Susan Fader

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19115

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G STREET NE, SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
check from Cheryl Dauber

Candidate Name
FRIENDS OF SENATOR CARL LEVIN

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 00

Transaction ID: SB23.19116

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SHERROD BROWN

Mailing Address PO BOX 76187
Suite 800

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement

011
Category/
Type

Candidate Name
FRIENDS OF SHERROD BROWN

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 00

Transaction ID: SB23.17681

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Kevin Lemmer

011
Category/
Type

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18852

Date of Disbursement

01 / 16 / 2007

Amount of Each Disbursement this Period

2100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
check from Lieba Halpern

011
Category/
Type

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18853

Date of Disbursement

01 / 30 / 2007

Amount of Each Disbursement this Period

2100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from David Flamholz

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18854

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
check from Jeffrey Weinstein

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18855

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
ThompsonHotel check - Lawrence Pomeranc

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18866

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 1 6 / 2 0 0 7

Amount of Each Disbursement this Period

2100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18856

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Ben Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18857

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Jeffrey Weinstein

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18858

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18859

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Ben Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18860

Date of Disbursement

03 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18861

Date of Disbursement

03 / 30 / 2007

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
credit card from Ben Chouake

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18862

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
check from Joshua Landes

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18863

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
check from Joshua Landes

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18864

Date of Disbursement

/ /

Amount of Each Disbursement this Period

800.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Mailing Address PO BOX 16118

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement
check from Susan Fishbein-Druck

Candidate Name
JOHN MCCAIN 2008-EXPLORATORY COMMITTEE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18865

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Karen Weinstein

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 00

Transaction ID: SB23.18886

Date of Disbursement

03 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Robert Goodman

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 00

Transaction ID: SB23.18887

Date of Disbursement

03 / 04 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Howard Baruch

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18888

Date of Disbursement

03 / 04 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Sheldon Zelig

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18889

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18890

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Robert Gottesman

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18891

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
credit card from Jerry Gontownik

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18892

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from David Fishel

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18893

Date of Disbursement

03 / 09 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18894

Date of Disbursement

03 / 10 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18094

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Jason Muss

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18895

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Drew Parker

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18896

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Nathan Lindenbaum

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18897

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Leon Kozak

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18898

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
credit card from Lori Lemmer

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18899

Date of Disbursement

03 / 20 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARK PRYOR FOR US SENATE

Mailing Address PO BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
check from Jack Halpern

Candidate Name
MARK PRYOR FOR US SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: AR District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18900

Date of Disbursement

03 / 25 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MIKE PENCE COMMITTEE

Mailing Address P. O. Box 408

City Anderson State IN Zip Code 46015

Purpose of Disbursement
check from David Salomon

Candidate Name
MIKE PENCE COMMITTEE

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 06

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.19321

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

2300.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from David Salomon Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19322 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 2300.00 [MEMO ITEM]
B. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Robert Goodman Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19323 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
C. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Marc Lipschultz Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19324 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶		0.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Lance Warrick Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19325 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
B. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Richard Wolf Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19326 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
C. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Raanan Agus Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19328 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶		0.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Lawrence Bernstein Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19329 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
B. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement check from Daniel Posner Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.19330 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
C. MIKE PENCE COMMITTEE Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 408 City Anderson State IN Zip Code 46015 Purpose of Disbursement Candidate Name MIKE PENCE COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.18752 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 3000.00
SUBTOTAL of Disbursements This Page (optional)		3000.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City State Zip Code
Levittown PA 19058

Purpose of Disbursement

011
Category/
Type

Candidate Name
PATRICK MURPHY FOR CONGRESS

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 8

Transaction ID: SB23.18754

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code
GREAT BEND KS 67530

Purpose of Disbursement
check from Dan Feder

011
Category/
Type

Candidate Name
PAT ROBERTS FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.18903

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code
GREAT BEND KS 67530

Purpose of Disbursement
check from Ben Chouake

011
Category/
Type

Candidate Name
PAT ROBERTS FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: SB23.18901

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. STEVEN R ROTHMAN Full Name (Last, First, Middle Initial) Mailing Address 18 MALTESE DRIVE City FAIR LAWN State NJ Zip Code 07410 Purpose of Disbursement Candidate Name STEVEN R ROTHMAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.17793 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 2000.00 011 Category/ Type
B. RUDY GIULIANI PRESIDENTIAL CMTE Full Name (Last, First, Middle Initial) Mailing Address C/O JOHN GROSS PROSKAUER ROSE LLP 1585 BROADWAY City NEW YORK State NY Zip Code 10036 Purpose of Disbursement credit card from Edward Neiger Candidate Name RUDY GIULIANI PRESIDENTIAL CMTE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.18830 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 Amount of Each Disbursement this Period 500.00 011 Category/ Type [MEMO ITEM]
C. RUDY GIULIANI PRESIDENTIAL CMTE Full Name (Last, First, Middle Initial) Mailing Address C/O JOHN GROSS PROSKAUER ROSE LLP 1585 BROADWAY City NEW YORK State NY Zip Code 10036 Purpose of Disbursement check from Jack Halpern Candidate Name RUDY GIULIANI PRESIDENTIAL CMTE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.18826 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 2300.00 011 Category/ Type [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		2000.00
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. RUDY GIULIANI PRESIDENTIAL CMTE

Mailing Address C/O JOHN GROSS
PROSKAUER ROSE LLP 1585 BROADWAY

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
check from Jack Halpern

Candidate Name
RUDY GIULIANI PRESIDENTIAL CMTE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18828

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2300.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RUDY GIULIANI PRESIDENTIAL CMTE

Mailing Address C/O JOHN GROSS
PROSKAUER ROSE LLP 1585 BROADWAY

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
credit card from Reuven Escott

Candidate Name
RUDY GIULIANI PRESIDENTIAL CMTE

Office Sought: ☐ House ☐ Senate ☒ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.18829

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SWETT FOR SENATE

Mailing Address PO BOX 1937

City BOW State NH Zip Code 03304

Purpose of Disbursement

Candidate Name
SWETT FOR SENATE

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 00

Transaction ID: SB23.18773

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. SWETT FOR SENATE

Mailing Address PO BOX 1937

City BOW State NH Zip Code 03304

Purpose of Disbursement
credit card from Esther Chouake

Candidate Name
SWETT FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: NH District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18833

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SWETT FOR SENATE

Mailing Address PO BOX 1937

City BOW State NH Zip Code 03304

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
SWETT FOR SENATE

Office Sought: ☐ House
☒ Senate
☐ President

State: NH District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18835

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

36000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Michael Gartenberg

Mailing Address 297 Ogden Ave.

City
Teaneck

State
NJ

Zip Code
07666

Purpose of Disbursement
refund May 2007 trip registrations

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.18649

Date of Disbursement

/ /

Amount of Each Disbursement this Period

275.00

SUBTOTAL of Disbursements This Page (optional)

275.00

TOTAL This Period (last page this line number only)

275.00