

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

DONALD NORCROSS FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 160

Check if different than previously reported. (ACC)

COLLINGSWOOD

NJ

08108

2. **FEC IDENTIFICATION NUMBER** ▼

C C00558320

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

NJ

01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on  /  /  in the State of

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

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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 Melissa D Pollitt

Signature of Treasurer Melissa D Pollitt

**[Electronically Filed]**

Date

/  /

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	362235.00	670103.50
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	362235.00	670103.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	100589.28	380215.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	116.50	775.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	100472.78	379440.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	256846.86	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	15161.83	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	237650.00	362048.50
(ii) Unitemized.....	1585.00	8555.00
(iii) TOTAL of contributions from individuals ▶	239235.00	370603.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	123000.00	299500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	362235.00	670103.50
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	15161.83	15161.83
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	15161.83	15161.83
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	116.50	775.36
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	35.88	35.88
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	377549.21	686076.57

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	100589.28	380215.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	86946.35	150000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	86946.35	150000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	187535.63	530215.48

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	66833.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	377549.21
25. SUBTOTAL (add Line 23 and Line 24).....	444382.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	187535.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	256846.86

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

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

FOR LINE NUMBER: PAGE 5 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**1868 Public Affairs, LLC**

Mailing Address 15 West Front St

City State Zip Code  
Trenton NJ 08608

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8826**

Amount of Each Receipt this Period  
 1500.00

Partnership Contribution

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

Mailing Address 59 Woodland Ave

City State Zip Code  
East Orange NJ 07017

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

Name of Employer Occupation  
1868 Public Affairs, LLC Partner / Gov't Affairs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8826.0**

Amount of Each Receipt this Period  
 1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 200 High St

City State Zip Code  
Mt. Holly NJ 08060

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

Name of Employer Occupation  
Alaimo Group President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8913**

Amount of Each Receipt this Period  
 1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 201 West End Ave

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Alberto & Associates Occupation Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.8916**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 74 Lyman Ave

City Woodbury State NJ Zip Code 08096

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

Name of Employer Ray Angelini, Inc. Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.9160**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**AristaCare Health Services LLC**

Mailing Address 51 Cragwood Rd

City South Plainfield State NJ Zip Code 07080

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2015

**Transaction ID : SA11AI.8940**

Amount of Each Receipt this Period  
2600.00  
Partnership Contribution

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

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

5600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 971 East 24th St

City State Zip Code  
Brooklyn NY 11210

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

Name of Employer Occupation  
AristaCare Health Services LLC Managing Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 20 / 2015

**Transaction ID : SA11AI.8940.0**

Amount of Each Receipt this Period  
2600.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 505 South Lenola Rd

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
Jersey Outdoor Media, LLC Executive VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SA11AI.9082**

Amount of Each Receipt this Period  
1500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13820.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 11 / 2015

**Transaction ID : SA11AI.9082.0**

Amount of Each Receipt this Period  
1500.00

Conduit Contribution

**[MEMO ITEM]**

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Atlantic Realty Partners LLC**

Mailing Address 204 Harding Ave

City Bellmawr State NJ Zip Code 08031

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8947**

Amount of Each Receipt this Period  
 750.00

Partnership Contribution

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

Mailing Address 204 Harding Ave

City Bellmawr State NJ Zip Code 08031

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

Name of Employer Occupation  
 Atlantic Realty Partners LLC Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8947.0**

Amount of Each Receipt this Period  
 750.00

Partner Share

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**B&S Partnership**

Mailing Address 71 West Park Ave

City Vineland State NJ Zip Code 08360

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.8959**

Amount of Each Receipt this Period  
 1500.00

Partnership Contribution

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

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

2250.00



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

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

FOR LINE NUMBER: PAGE 9 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 71 West Park Ave

City Vineland State NJ Zip Code 08360

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

Name of Employer B&S Partnership Occupation Executive / Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.8959.0**

Amount of Each Receipt this Period  
1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 806 Station Ave

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Bach Associates, PC Occupation Engineer/Architect

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.8942**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 500 S. Kings Hwy

City Cherry Hill State NJ Zip Code 08034

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.8951**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ivan J Becica</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2015	
Mailing Address 500 S. Kings Hwy		<b>Transaction ID : SA11AI.8951.0</b>	
City Cherry Hill	State NJ	Zip Code 08034	Amount of Each Receipt this Period _____ 562.50 Partner Share <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Becica Associates, LLC	Occupation Engineer/Managing Member		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 729.17		

Full Name (Last, First, Middle Initial) <b>B. Steven A Becica</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2015	
Mailing Address 500 S. Kings Hwy		<b>Transaction ID : SA11AI.8951.1</b>	
City Cherry Hill	State NJ	Zip Code 08034	Amount of Each Receipt this Period _____ 562.50 Partner Share <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Becica Associates, LLC	Occupation Member		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 729.16		

Full Name (Last, First, Middle Initial) <b>C. John J Middleton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 24 / 2015	
Mailing Address 500 S. Kings Hwy		<b>Transaction ID : SA11AI.8951.2</b>	
City Cherry Hill	State NJ	Zip Code 08034	Amount of Each Receipt this Period _____ 375.00 Partner Share <b>[MEMO ITEM]</b>
FEC ID number of contributing federal political committee.		C	
Name of Employer Becica Associates, LLC	Occupation Member		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 541.67		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anthony J Bellia</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2015	
Mailing Address 317 Harrisonville Rd		<b>Transaction ID : SA11AI.8944</b>	
City Mullica Hill	State NJ	Amount of Each Receipt this Period 1500.00	
Zip Code 08062			
FEC ID number of contributing federal political committee. C			
Name of Employer Bellia Office Furniture	Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph Benton Jr</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2015	
Mailing Address 2312 Fernwood Ave		<b>Transaction ID : SA11AI.9031</b>	
City Atco	State NJ	Amount of Each Receipt this Period 250.00	
Zip Code 08004			
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) <b>C. George F Beppel</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2015	
Mailing Address 260 Ridings Way		<b>Transaction ID : SA11AI.9159</b>	
City Ambler	State PA	Amount of Each Receipt this Period 1500.00	
Zip Code 19002			
FEC ID number of contributing federal political committee. C			
Name of Employer Ragone Lacatena Fairchild Bepp	Occupation CPA		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 135

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 66 Manor House Dr

City State Zip Code  
 Cherry Hill NJ 08003

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

Name of Employer Occupation  
 Barb's Harley Davidson Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.8943**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 132 Kings Hwy E

City State Zip Code  
 Haddonfield NJ 08033

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

Name of Employer Occupation  
 Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : SA11AI.9206**

Amount of Each Receipt this Period  
 1500.00

Partnership Contribution

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

Mailing Address 515 Westminster Ave

City State Zip Code  
 Haddonfield NJ 08033

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

Name of Employer Occupation  
 BRE Presents LLC President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : SA11AI.9206.0**

Amount of Each Receipt this Period  
 1500.00

Partner Share  
**[MEMO ITEM]**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 5601 Atlantic Ave

City State Zip Code  
Ventnor NJ 08406

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

Name of Employer Occupation  
Calvi Electric Company Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SA11AI.8983**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 5601 Atlantic Ave

City State Zip Code  
Ventnor NJ 08406

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

Name of Employer Occupation  
Calvi Electric Company Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 24 / 2015

**Transaction ID : SA11AI.8984**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Brown & Connery, LLP**

Mailing Address 360 Haddon Ave  
PO Box 539

City State Zip Code  
Westmont NJ 08108

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.8976**

Amount of Each Receipt this Period  
1500.00  
Partnership Contribution

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 360 Haddon Ave  
PO Box 539

City State Zip Code  
Westmont NJ 08108

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

Name of Employer Occupation  
Brown & Connery, LLP Attorney/Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 15 2015

**Transaction ID : SA11AI.8976.0**

Amount of Each Receipt this Period  
1500.00

Partner Share  
**[MEMO ITEM]**

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

Mailing Address 1515 Burnt Mill Rd

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
The Four B's Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 14 2015

**Transaction ID : SA11AI.9181**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 1655 US Hwy 9

City State Zip Code  
Old Bridge NJ 08857

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

Name of Employer Occupation  
Brunetti Organization Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 18 2015

**Transaction ID : SA11AI.8978**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert W Bucknam Jr.**

Mailing Address 120 Forest Dr

City State Zip Code  
Hammonton NJ 08037

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.8936**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 101 Hun Rd

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Byrne Asset Management Investments

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.8979**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 406 Sawyers Lane

City State Zip Code  
Newtown PA 18940

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

Name of Employer Occupation  
Cairone & Kaupp Landscape Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.8982**

Amount of Each Receipt this Period  
1500.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 504 Jefferson Ave

City Avon By The Sea State NJ Zip Code 07717

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

Name of Employer French & Parrello Occupation Consulting Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.9055**

Amount of Each Receipt this Period  
1500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
15320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

**Transaction ID : SA11AI.9055.0**

Amount of Each Receipt this Period  
1500.00

Conduit Contribution

**[MEMO ITEM]**

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

Mailing Address 601A White Horse Pike

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.8985**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 316 Chews Landing Rd

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Archer & Greiner Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8934**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address 231 Hopkins Rd

City Mickleton State NJ Zip Code 08056

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

Name of Employer Bowman & Co, LLP Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8957**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 100 Route 73 North

City Palmyra State NJ Zip Code 08065

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9036**

Amount of Each Receipt this Period  
**1500.00**  
 Partnership Contribution

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 100 Route 73 North

City Palmyra State NJ Zip Code 08065

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

Name of Employer Occupation  
FC Kerbeck / CGF Associates President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9036.0**

Amount of Each Receipt this Period  
1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 81 Westminster Dr

City Voorhees State NJ Zip Code 08043

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

Name of Employer Occupation  
T&M Associates Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.9148**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 170 Sugarberry Dr

City New Castle State DE Zip Code 19720

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

Name of Employer Occupation  
Aviman Management Construction

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8921**

Amount of Each Receipt this Period  
1500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Conifer Realty, LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 22 / 2015	
Mailing Address 183 E. Main St		<b>Transaction ID : SA11AI.9003</b>	
City Rochester	State NY	Zip Code 14604	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00 Partnership Contribution	
Name of Employer Occupation		Election Cycle-to-Date 1500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Timothy Fournier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 22 / 2015	
Mailing Address 183 E. Main St		<b>Transaction ID : SA11AI.9003.0</b>	
City Rochester	State NY	Zip Code 14604	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00 Partner Share	
Name of Employer Conifer Realty, LLC Occupation Partner		Election Cycle-to-Date 1500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. John J Connors</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 403 Pleasant Valley Ave		<b>Transaction ID : SA11AI.9290</b>	
City Moorestown	State NJ	Zip Code 08057	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer SJ Mechanical Contractors Assn Occupation Director		Election Cycle-to-Date 1500.00	
Receipt For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Delor D'Andrea Cornell**

Mailing Address **PO Box 807**

City **Woodbury** State **NJ** Zip Code **08096**

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

Name of Employer **Cornell & Co** Occupation **President**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 03 / 2015**

**Transaction ID : SA11AI.9001**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Critchley, Kinum & Vazquez LLC**

Mailing Address **75 Livingston Ave  
3rd Fl**

City **Roseland** State **NJ** Zip Code **07068**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : SA11AI.9124**

Amount of Each Receipt this Period  
**1500.00**

Partnership Contribution

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

Mailing Address **75 Livingston Ave**

City **Roseland** State **NJ** Zip Code **07068**

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

Name of Employer **Critchley, Kinum & Vazquez LLC** Occupation **Attorney**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : SA11AI.9124.0**

Amount of Each Receipt this Period  
**1500.00**

Partner Share  
**[MEMO ITEM]**

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

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

**3000.00**

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

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

FOR LINE NUMBER: PAGE 21 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 37 Elkington Rd

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Phoenix Strategies Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9014**

Amount of Each Receipt this Period  
1500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
24070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9014.0**

Amount of Each Receipt this Period  
1500.00

Conduit Contribution

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Mark D'Agostino**

Mailing Address 210 Casperson St

City State Zip Code  
Gibbstown NJ 08027

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

Name of Employer Occupation  
Foundation Title Title Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9054**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Miriam D'Andrea</b>		Date of Receipt MM / DD / YYYY 09 / 03 / 2015
Mailing Address 172 Trellis Ln		<b>Transaction ID : SA11AI.9007</b>
City Sewell	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Gary Dahms</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2015
Mailing Address PO Box 501		<b>Transaction ID : SA11AI.9178</b>
City Allenwood	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer T&M Associates	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Gerald E Darling</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2015
Mailing Address 120 Somers Ct South		<b>Transaction ID : SA11AI.8932</b>
City Moorestown	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Archer & Greiner	Occupation Attorney	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 117 Spyglass Dr

City State Zip Code  
Blue Bell PA 19422

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8937**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**DeCotiis Fitzpatrick & Cole LLP**

Mailing Address 500 Frank W Burr Blvd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9028**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

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

Mailing Address 200 Campbell Dr  
Ste 200

City State Zip Code  
Willingboro NJ 08046

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.9198**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

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

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

3300.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9028

No Itemizable Partner Share

Form/Schedule:

Transaction ID:



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 200 Campbell Dr  
Suite 200

City Willingboro State NJ Zip Code 08046

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

Name of Employer Delco Development Occupation Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.9198.0**

Amount of Each Receipt this Period  
1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address PO Box 354

City Moorestown State NJ Zip Code 08057

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

Name of Employer CMSI, LLC Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9012**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 118 S 18th Ave

City Longport State NJ Zip Code 08403

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.9022**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 1500 Market St  
Suite 3500E

City Philadelphia State PA Zip Code 19102

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9027**

Amount of Each Receipt this Period  
 1500.00  
 Partnership Contribution

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

Mailing Address 440 S Broad St  
PH2

City Philadelphia State PA Zip Code 19146

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

Name of Employer Occupation  
Dranoff Properties Inc. Developer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.9026**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address Birdwood House  
Hopkins Ln

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8935**

Amount of Each Receipt this Period  
 300.00

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

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

3300.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9027

No Itemizable Partner Share

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 28 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 136 Terrace Ave

City Jersey City State NJ Zip Code 07307

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

Name of Employer NW Financial Occupation Investment Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2350.00

Date of Receipt  
 09 / 15 / 2015

**Transaction ID : SA11AI.9147**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 5496 E Chestnut Ave

City Vineland State NJ Zip Code 08360

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

Name of Employer Falasca Mechanical, Inc. Occupation Mechanical Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 09 / 15 / 2015

**Transaction ID : SA11AI.9035**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 2636 Brown St

City Philadelphia State PA Zip Code 19130

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

Name of Employer The Echo Group Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

Date of Receipt  
 09 / 15 / 2015

**Transaction ID : SA11AI.9182**

Amount of Each Receipt this Period  
 500.00

Earmarked Contribution

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 29 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
21320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 15 2015

**Transaction ID : SA11AI.9182.0**

Amount of Each Receipt this Period  
500.00

Conduit Contribution

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Matthew J Finnegan MD**

Mailing Address 200 Chews Landing Rd

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
Lourdes Health Physician

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2015

**Transaction ID : SA11AI.9119**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 2135 Green St

City State Zip Code  
Philadelphia PA 19145

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

Name of Employer Occupation  
Concord Asset Mgmt LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 31 2015

**Transaction ID : SA11AI.8995**

Amount of Each Receipt this Period  
1300.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 2135 Green St

City Philadelphia State PA Zip Code 19145

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

Name of Employer Concord Asset Mgmt LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8996**

Amount of Each Receipt this Period  
1700.00

**B.** Full Name (Last, First, Middle Initial)  
**Florio Perrucci Steinhardt & Fader, LLC**

Mailing Address 218 Broubalow Way

City Phillipsburg State NJ Zip Code 08865

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9044**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Michael J Perrucci Esq.**

Mailing Address 2351 Washington Ln

City Bethlehem State PA Zip Code 18015

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

Name of Employer Florio Perrucci et al Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9044.0**

Amount of Each Receipt this Period  
750.00

Partner Share

**[MEMO ITEM]**

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

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

3200.00

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

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

FOR LINE NUMBER: PAGE 31 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Paul T Fader Esq.**

Mailing Address 218 Rt 17 N  
Suite 300

City Rochelle Park State NJ Zip Code 07662

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

Name of Employer Florio Perrucci et al Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9044.1**

Amount of Each Receipt this Period  
750.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 1141 Winding Dr

City Cherry Hill State NJ Zip Code 08003

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9038**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 1141 Winding Dr

City Cherry Hill State NJ Zip Code 08003

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9039**

Amount of Each Receipt this Period  
2300.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Richard Forman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 22 / 2015
Mailing Address 1141 Winding Dr		<b>Transaction ID : SA11AI.9040</b>
City Cherry Hill	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer Forman Mills	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>Richard Forman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 22 / 2015
Mailing Address 1141 Winding Dr		<b>Transaction ID : SA11AI.9041</b>
City Cherry Hill	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Forman Mills	Occupation CEO	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>Charles Foulke</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015
Mailing Address 800 Springdale Rd		<b>Transaction ID : SA11AI.8987</b>
City Cherry Hill	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Cherry Hill Triplex	Occupation President	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Charles Foulke</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015	
Mailing Address 800 Springdale Rd		<b>Transaction ID : SA11AI.8988</b>	
City Cherry Hill	State NJ	Zip Code 08003	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00	
Name of Employer Cherry Hill Triplex	Occupation President		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) <b>B. Charles Foulke III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2015	
Mailing Address 35 Yorkshire Dr		<b>Transaction ID : SA11AI.9052</b>	
City Voorhees	State NJ	Zip Code 08043	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Foulke Management	Occupation Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>C. Terence J Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 1132 Parliament Way		<b>Transaction ID : SA11AI.8938</b>	
City Thorofare	State NJ	Zip Code 08086	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Archer & Greiner	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 102 Simi Ct

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Diener Brick Co VP Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9021**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 433 Chairville Rd

City State Zip Code  
Vincetown NJ 08088

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

Name of Employer Occupation  
Gary F. Gardner, Inc. General Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9058**

Amount of Each Receipt this Period  
1500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
18320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9058.0**

Amount of Each Receipt this Period  
1500.00

Conduit Contribution

**[MEMO ITEM]**

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 1640 Pennfield Dr

City State Zip Code  
Thorofare NJ 08086

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8924**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1 Harrowgate Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8931**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Group Melvin Design, LLC**

Mailing Address 2 Aquarium Dr  
Ste 320

City State Zip Code  
Camden NJ 08103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.9202**

Amount of Each Receipt this Period  
1500.00  
Partnership Contribution

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 36 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 143B North 22nd St

City Philadelphia State PA Zip Code 19132

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

Name of Employer Group Melvin Design, LLC Occupation Professional Planner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.9202.0**

Amount of Each Receipt this Period  
1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 841 Merion Sq Rd

City Gladwyne State PA Zip Code 19035

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

Name of Employer CSMI, LLC Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9013**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 7201 Wayne Ave

City Philadelphia State PA Zip Code 19119

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

Name of Employer Liberty Property Trust Occupation Chariman & CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 19 / 2015

**Transaction ID : SA11AI.9098**

Amount of Each Receipt this Period  
1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 146 Peach Rd

City State Zip Code  
Bellmawr NJ 08031

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

Name of Employer Occupation  
Law Offices of Lynda Hinkle Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9111**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 44 Euclid St

City State Zip Code  
Woodbury NJ 08096

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

Name of Employer Occupation  
Holmes & Co, LLC CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9289**

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 69

City State Zip Code  
Gloucester City NJ 08030

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

Name of Employer Occupation  
Holt Logistics Corp Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9068**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 38 OF 135  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 19 Merganser Ct

City State Zip Code  
Glassboro NJ 08028

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
MM / DD / YYYY  
08 / 31 / 2015

**Transaction ID : SA11AI.8925**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 20 Valley View Terr

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
Taylor Wiseman Taylor Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 11 / 2015

**Transaction ID : SA11AI.9179**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 20 Royal Dominion Ct

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
Hutton Strategies Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2015

**Transaction ID : SA11AI.9163**

Amount of Each Receipt this Period  
500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 39 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence R Inserra Jr.**

Mailing Address 112 Canterbury Dr

City Ramsey State NJ Zip Code 07446

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

Name of Employer Inserra Supermarkets, Inc. Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2015

**Transaction ID : SA11AI.9070**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 7 S Lanning Ave

City Hopewell State NJ Zip Code 08525

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

Name of Employer Rosemont Assoc LLC Occupation Senior Vice President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9170**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 985 Oak Crest Lane

City Media State PA Zip Code 19063

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

Name of Employer Inspira Health Network Occupation VP Gov't & Ext Relations

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11AI.9071**

Amount of Each Receipt this Period  
 500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 52 Maidenhead Rd

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Kaufman Zita Group Lobbyist/Government Relations

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9094**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 214 Jefferson Ave

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
Kearney & Associates Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9095**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 339 Alhambra Pl

City State Zip Code  
West Palm Beach FL 33405

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

Name of Employer Occupation  
Kennedy Management & Consulting Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9078**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 124 Washington St #101

City State Zip Code  
Foxboro MA 02035

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

Name of Employer Occupation  
The Kennedy Forum Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9042**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 425 Lakeview Ave

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
Surety Title President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8968**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 36 Vaughn Ave

City State Zip Code  
Bellmawr NJ 08031

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

Name of Employer Occupation  
Lighthouse Development Group President / Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9100**

Amount of Each Receipt this Period  
1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Adam M Kotlar</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 1913 Greentree Rd Ste C		<b>Transaction ID : SA11AI.9103</b>	
City State Zip Code Cherry Hill NJ 08003	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Law Offices Of Adam M. Kotlar Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>B. Eli Kramer</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2015	
Mailing Address 21 Kilmer Dr Bldg 2, Ste E		<b>Transaction ID : SA11AI.9029</b>	
City State Zip Code Morganville NJ 07751	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation EK Consulting Services LLC Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) <b>C. David Brett Krone</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 3257 O Street NW		<b>Transaction ID : SA11AI.9016</b>	
City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Self Consultant		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4700.00
<b>TOTAL</b> This Period (last page this line number only).....	4700.00

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

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

FOR LINE NUMBER: PAGE 43 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 3257 O Street  
NW

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9018**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 107 S Argyle Ave

City Margate City State NJ Zip Code 08402

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

Name of Employer Cooper Levenson Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9000**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 6 Trefoil Terrace

City Mount Laurel State NJ Zip Code 08054

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

Name of Employer Conner Strong Buckelew Occupation Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9281**

Amount of Each Receipt this Period  
1500.00

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

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

5700.00

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

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

FOR LINE NUMBER: PAGE 44 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 1 Blakely Rd

City Haverford State PA Zip Code 19041

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

Name of Employer JL Square Group LLC Occupation Founder / Managing Member

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11AI.9074**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Louis N Magazzu Esq.**

Mailing Address 553 W Oak Rd

City Vineland State NJ Zip Code 08360

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

Name of Employer Louis N Magazzu, LLC Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9110**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address PO Box 20

City Milmay State NJ Zip Code 08340

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

Name of Employer Charles Marandino LLC Occupation Concrete Contractor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2015

**Transaction ID : SA11AI.9114**

Amount of Each Receipt this Period  
 300.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph A Maressa Jr., Esq.**

Mailing Address 185 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation  
Title America Agency Corp Title Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.9117**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 191 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9115**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

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

Mailing Address 191 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation  
Maressa Patterson, LLC Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9115.0**

Amount of Each Receipt this Period  
1500.00

Partner Share

**[MEMO ITEM]**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 150 Westover Dr

City State Zip Code  
Delran NJ 08075

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

Name of Employer Occupation  
Moorestown Field Club Assistant Superintendent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2015

**Transaction ID : SA11AI.9057**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 205 S Marion Ave

City State Zip Code  
Wenonah NJ 08090

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

Name of Employer Occupation  
Cornell & Co PR Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.9002**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Martin F McKernan Jr**

Mailing Address 5207 Bishops View Cir

City State Zip Code  
Cherry Hill NJ 08002

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

Name of Employer Occupation  
McKernan McKernan Godino Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9118**

Amount of Each Receipt this Period  
1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 3 Surrey Dr

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
Pennoni Associates CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8927**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 402 Newbold Rd

City State Zip Code  
Jenkintown PA 19046

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

Name of Employer Occupation  
Utility Line Service, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9188**

Amount of Each Receipt this Period  
1300.00

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

Mailing Address 402 Newbold Rd

City State Zip Code  
Jenkintown PA 19046

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

Name of Employer Occupation  
Utility Line Service, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2015

**Transaction ID : SA11AI.9189**

Amount of Each Receipt this Period  
200.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Miller-Remick LLC**

Mailing Address 1010 Kings Hwy South  
FI 1

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9126**

Amount of Each Receipt this Period  
1500.00  
Partnership Contribution

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

Mailing Address 1010 Kings Hwy South  
FI 1

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Miller-Remick LLC Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9126.0**

Amount of Each Receipt this Period  
1500.00  
Partner Share  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Louis R Moffa Jr.**

Mailing Address 110 Farmington Rc

City State Zip Code  
Cherry Hill NJ 08024

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

Name of Employer Occupation  
Montgomery McCracken Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9123**

Amount of Each Receipt this Period  
500.00

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

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

2000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 112 Nantucket Dr

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.8993**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 252 Strawbridge Ave

City State Zip Code  
Collingswood NJ 08108

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

Name of Employer Occupation  
Flying Fish Brewing Co President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9047**

Amount of Each Receipt this Period  
1000.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19320.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9047.0**

Amount of Each Receipt this Period  
1000.00

Conduit Contribution

**[MEMO ITEM]**

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address R.D.1, 5 Treetop Lane

City State Zip Code  
Westampton NJ 08060

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

Name of Employer Occupation  
Alaimo Group Senior Associate

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8914**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 45 Blossom Cove Rd

City State Zip Code  
Red Bank NJ 07701

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

Name of Employer Occupation  
Murphy Endeavors Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.8920**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John F Muscella Jr.**

Mailing Address 6 Brookview Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Conner Strong Buckelew CFO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8998**

Amount of Each Receipt this Period  
500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 2 Yearling Chase

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9139**

Amount of Each Receipt this Period  
 2700.00

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

Mailing Address 2 Yearling Chase

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9141**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**George E Norcross III**

Mailing Address 401 Rt 73 North, Suite 300  
40 Lake Ctr Exec Pk

City Marlton State NJ Zip Code 08053

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

Name of Employer Conner Strong & Buckelew Occupation Executive Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9134**

Amount of Each Receipt this Period  
 2700.00

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

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

8100.00

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

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

FOR LINE NUMBER: PAGE 52 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**George E Norcross III**

Mailing Address 401 Rt 73 North, Suite 300  
40 Lake Ctr Exec Pk

City Marilton State NJ Zip Code 08053

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

Name of Employer Conner Strong & Buckelew Occupation Executive Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9135**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**John C Norcross PhD**

Mailing Address 1013 Fairfield Circle

City Clarks Summit State PA Zip Code 18411

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

Name of Employer University of Scranton Occupation Professor/Psychologist

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2015

**Transaction ID : SA11AI.9089**

Amount of Each Receipt this Period  
1500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
16820.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2015

**Transaction ID : SA11AI.9089.0**

Amount of Each Receipt this Period  
1500.00

Conduit Contribution

**[MEMO ITEM]**

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Parker McCay Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9142**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Parker McCay Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9144**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 401 Rt 73 N, Suite 300  
40 Lake Ctr Exec Pk

City State Zip Code  
Marlton NJ 08053

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9136**

Amount of Each Receipt this Period  
2700.00

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

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

8100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sandra T Norcross</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015
Mailing Address 401 Rt 73 N, Suite 300 40 Lake Ctr Exec Pk		<b>Transaction ID : SA11AI.9137</b>
City Marilton State NJ Zip Code 08053	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Name of Employer N/A Occupation Homemaker	Amount of Each Receipt this Period 5400.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>B. Normandy FW, LLC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2015
Mailing Address 53 Maple Ave		<b>Transaction ID : SA11AI.9145</b>
City Morristown State NJ Zip Code 07960	Amount of Each Receipt this Period 1500.00 Partnership Contribution	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation	Amount of Each Receipt this Period 2500.00
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Francis Wentworth</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2015
Mailing Address 1776 On the Green 67 Park Place		<b>Transaction ID : SA11AI.9145.0</b>
City Morristown State NJ Zip Code 07960	Amount of Each Receipt this Period 1500.00 Partner Share	
FEC ID number of contributing federal political committee. C	Name of Employer Normandy FW, LLC Occupation Owner	Amount of Each Receipt this Period 2500.00 <b>[MEMO ITEM]</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4200.00
<b>TOTAL</b> This Period (last page this line number only).....	4200.00

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

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

FOR LINE NUMBER: PAGE 55 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 251 New Rd

City State Zip Code  
Marlton NJ 08053

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

Name of Employer Occupation  
Unique Industries, Inc. President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11AI.9034**

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 245 Auburn Rd

City State Zip Code  
Pilesgrove NJ 08098

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

Name of Employer Occupation  
CPS Distribution Services CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9010**

Amount of Each Receipt this Period  
700.00

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

Mailing Address 245 Auburn Rd

City State Zip Code  
Pilesgrove NJ 08098

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

Name of Employer Occupation  
CPS Distribution Services CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9011**

Amount of Each Receipt this Period  
2300.00

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

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

5700.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Obermayer Rebmann Maxwell & Hippel, LLP**

Mailing Address 1617 JFK Blvd, 19th Fl

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9157**

Amount of Each Receipt this Period  
 1500.00  
 Partnership Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Thomas A Leonard Esq.**

Mailing Address 1671 JFK Blvd  
 19th Fl

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation  
 Obermayer Rebmann et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9157.0**

Amount of Each Receipt this Period  
 1500.00  
 Partner Share  
**[MEMO ITEM]**

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

Mailing Address 117 Augusta Dr

City Moorestown State NJ Zip Code 08057

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

Name of Employer Occupation  
 Continuum Health Alliance Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8991**

Amount of Each Receipt this Period  
 1500.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 57 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 401 Willow Ln

City Southampton State NJ Zip Code 08088

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

Name of Employer Lymar Builder Occupation General Contractor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9112**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 942 Black Rock Rd

City Gladwyne State PA Zip Code 19035

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

Name of Employer P Agnes Construction Occupation Principal / Vice President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9149**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 4055 Gnarled Oaks Ln

City Johns Island State SC Zip Code 29455

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.9023**

Amount of Each Receipt this Period  
 1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 21 West High St

City State Zip Code  
Glassboro NJ 08028

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

Name of Employer Occupation  
Petroni & Associates CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2015

**Transaction ID : SA11AI.9152**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 8601 Thomas Mill Terr

City State Zip Code  
Philadelphia PA 19128

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8989**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 151 Renaissance Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Platt Memorial Chapels Funeral Director

Receipt For: 2015  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.8955**

Amount of Each Receipt this Period  
250.00

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

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

3250.00

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

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

FOR LINE NUMBER: PAGE 59 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 8 Hazelhurst Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Platt & Riso PC Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9174**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 228 Grove St

City State Zip Code  
Montclair NJ 07042

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

Name of Employer Occupation  
Global Strategy Group Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2015

**Transaction ID : SA11AI.9156**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 27 Corshan Rd

City State Zip Code  
Medford NJ 08055

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

Name of Employer Occupation  
Alaimo Group Senior Associate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8912**

Amount of Each Receipt this Period  
1500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Karen Primak</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 24 Galloping Hill		<b>Transaction ID : SA11AI.9086</b>	
City Cherry Hill	State NJ	Zip Code 08003	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer IPAK, Inc.	Occupation President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		
		Earmarked Contribution	

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address P.O. BOX 441146		<b>Transaction ID : SA11AI.9086.0</b>	
City SOMERVILLE	State MA	Zip Code 02144	
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 1500.00	
Name of Employer		Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20820.00		
		Conduit Contribution	
		<b>[MEMO ITEM]</b>	

Full Name (Last, First, Middle Initial) <b>C. Michael M Quick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015	
Mailing Address 323 Hawthorne Ave		<b>Transaction ID : SA11AI.9121</b>	
City Haddonfield	State NJ	Zip Code 08033	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Susquehanna Bancshares, Inc.	Occupation Banker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joseph J Raday</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 1646 Silver Birch Rd		<b>Transaction ID : SA11AI.8909</b>	
City Williamstown	State NJ	Zip Code 08094	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer Self - RWD Consultants, LLC	Occupation Engineer		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph J Raday</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 15 / 2015	
Mailing Address 1646 Silver Birch Rd		<b>Transaction ID : SA11AI.8910</b>	
City Williamstown	State NJ	Zip Code 08094	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer Self - RWD Consultants, LLC	Occupation Engineer		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) <b>C. Jason A Ravitz</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2015	
Mailing Address 600 Kings Hwy North		<b>Transaction ID : SA11AI.9177</b>	
City Cherry Hill	State NJ	Zip Code 08034	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Supermarkets of Cherry Hill	Occupation Executive		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 6 Washington Ave

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Remington & Vernick Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9161**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 200 South Broad St Ste 420

City Philadelphia State PA Zip Code 19102

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

Name of Employer Ballard Spahr Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9063**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Harry F Renwick Jr.**

Mailing Address 100 S Lippincott Ave

City Maple Shade State NJ Zip Code 08052

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

Name of Employer Renwick & Associates Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9162**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 6793 Father John Ct

City McLean State VA Zip Code 22101

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9079**

Amount of Each Receipt this Period  
500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
24570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9079.0**

Amount of Each Receipt this Period  
500.00

Conduit Contribution

**[MEMO ITEM]**

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

Mailing Address 404 Loucroft Rd

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Cahill Wilinski Rhodes & Joyce Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8980**

Amount of Each Receipt this Period  
1500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 64 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 19 Ashbrooke Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Tars & Stripes Managing Member

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8922**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 401 Addison Ave

City State Zip Code  
Westmont NJ 08108

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

Name of Employer Occupation  
Artist Point President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9165**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 2516 Delancey St

City State Zip Code  
Philadelphia PA 19103

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8933**

Amount of Each Receipt this Period  
 300.00

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

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

3300.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 116 Westover Dr

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.9166**

Amount of Each Receipt this Period  
500.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
22570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.9166.0**

Amount of Each Receipt this Period  
500.00

Conduit Contribution

**[MEMO ITEM]**

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

Mailing Address 49 Bryce's Ct

City State Zip Code  
Sicklerville NJ 08081

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

Name of Employer Bowman & Co, LLP Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8958**

Amount of Each Receipt this Period  
1200.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 43 Holly Way  
On Clark's Pond

City State Zip Code  
Bridgeton NJ 08302

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

Name of Employer Occupation  
Salmon Ventures Ltd Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9172**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 67B Mountain Blvd Extension

City State Zip Code  
Warren NJ 07059

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

Name of Employer Occupation  
PS&S, LLC Executive VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11AI.9150**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 100 Station Ave

City State Zip Code  
Haddon Heights NJ 08035

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8939**

Amount of Each Receipt this Period  
300.00

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 67 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Alan F Savitz Esq**

Mailing Address 900 Rt 168  
Suite B3

City Turnersville State NJ Zip Code 08012

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11AI.8915**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 717 Main St

City Riverton State NJ Zip Code 08077

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

Name of Employer KMS Development Partners Occupation Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9097**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1715 Hillcrest Ln

City Aston State PA Zip Code 19014

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

Name of Employer Pennoni Associates Occupation Executive VP

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9132**

Amount of Each Receipt this Period  
 1000.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 2 Knoll Ct

City Sewell State NJ Zip Code 08080

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

Name of Employer Consulting Engineer Services Occupation Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8999**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 202 Gomez Rd

City Hobe Sound State FL Zip Code 33455

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

Name of Employer Owner Occupation Singh Real Estate Enterprises

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9072**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1487 Route 38

City Mt Holly State NJ Zip Code 08060

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

Name of Employer Sitzler & Sitzler Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9320**

Amount of Each Receipt this Period  
 1500.00

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

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

4500.00

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 6 Sandpiper Ct

City Skillman State NJ Zip Code 08558

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

Name of Employer MWW Group Occupation Government Affairs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9130**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Stradley, Ronon, Stevens & Young, LLP**

Mailing Address 2005 Market St Suite 2600

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11AI.9175**

Amount of Each Receipt this Period  
 1500.00

Partnership Contribution

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

Mailing Address 2005 Market St Suite 2600

City Philadelphia State PA Zip Code 19103

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

Name of Employer Stradley Ronon et al Occupation Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11AI.9175.0**

Amount of Each Receipt this Period  
 1500.00

Partner Share

**[MEMO ITEM]**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 350 Sentry Pkwy  
Bldg 630, Ste 300

City Blue Bell State PA Zip Code 19422

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9065**

Amount of Each Receipt this Period  
 1500.00

Partnership Contribution

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

Mailing Address 350 Sentry Pkwy  
Bldg 630, Ste 300

City Blue Bell State PA Zip Code 19422

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

Name of Employer Occupation  
Swanson Street Associates Developer/Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9065.0**

Amount of Each Receipt this Period  
 1500.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 3 Eastwood Ct

City Voorhees State NJ Zip Code 08043

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

Name of Employer Occupation  
Camden County College Adjunct Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.9173**

Amount of Each Receipt this Period  
 100.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**The Bloom Organization, LLC**

Mailing Address 1300 Rotue 73  
Suite 106

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8961**

Amount of Each Receipt this Period  
 1500.00  
 Parntership Contribution

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

Mailing Address 1300 Route 73  
Suite 106

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer Occupation  
 The Bloom Organziation, LLC Real Estate Management

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8961.0**

Amount of Each Receipt this Period  
 1500.00  
 Partner Share  
**[MEMO ITEM]**

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

Mailing Address 26 Independence Dr

City Bordentown State NJ Zip Code 08505

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

Name of Employer Occupation  
 Phoenix Advisors, LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9153**

Amount of Each Receipt this Period  
 2700.00

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

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

4200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 26 Independence Dr

City State Zip Code  
Bordentown NJ 08505

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

Name of Employer Occupation  
Phoenix Advisors, LLC Administrative Assistant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9154**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 8 Rockress Way

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Conner Strong Buckelew Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9005**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 6 Ella Dr

City State Zip Code  
Millstone Twp NJ 08510

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

Name of Employer Occupation  
CME Associates Professional Engineer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8992**

Amount of Each Receipt this Period  
1500.00

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

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

3300.00



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

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

FOR LINE NUMBER: PAGE 73 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William Anthony Van Veen**

Mailing Address 30 Tenby Chase

City State Zip Code  
Havertown PA 19083

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

Name of Employer Occupation  
AVL Digial Group CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.8945**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Wade, Long, Wood & Kennedy, LLC**

Mailing Address 1250 Chews Landing Rd

City State Zip Code  
Laurel Springs NJ 08021

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9194**

Amount of Each Receipt this Period  
1500.00

Partnership Contribution

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

Mailing Address 357 Tavistock Dr

City State Zip Code  
Medford NJ 08055

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

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
562.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9194.0**

Amount of Each Receipt this Period  
562.50

Partner Share  
**[MEMO ITEM]**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 23 Promenade Pl

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1562.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9194.1**

Amount of Each Receipt this Period  
562.50

Partner Share

**[MEMO ITEM]**

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

Mailing Address 1205 Chews Landing Rd

City State Zip Code  
Laurel Springs NJ 08021

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

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9194.2**

Amount of Each Receipt this Period  
375.00

Partner Share

**[MEMO ITEM]**

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

Mailing Address 832 Matlack Dr

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
Acacia Financial Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9096**

Amount of Each Receipt this Period  
750.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 2 Tuxedo Rd

City State Zip Code  
Glen Ridge NJ 07028

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

Name of Employer Occupation  
Acacia Financial Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SA11AI.9101**

Amount of Each Receipt this Period  
750.00

Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
22070.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2015

**Transaction ID : SA11AI.9101.0**

Amount of Each Receipt this Period  
750.00

Conduit Contribution

**[MEMO ITEM]**

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

Mailing Address 414 Delaware Ave

City State Zip Code  
National Park NJ 08063

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

Name of Employer Occupation  
McKernan Architects Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11AI.9093**

Amount of Each Receipt this Period  
1500.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 76 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 228 E Street NE

City Washington State DC Zip Code 20002

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

Name of Employer Tim Yehl, LLC Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9184**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 4 Penhale Psge

City Medford State NJ Zip Code 08055

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

Name of Employer Zallie's Supermarkets Occupation Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9190**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Raymond J Zane Esq**

Mailing Address 131 Delaware St

City Woobury State NJ Zip Code 08096

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

Name of Employer Zane & Lozuke Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2015

**Transaction ID : SA11AI.9019**

Amount of Each Receipt this Period  
 2700.00

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

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

4700.00

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

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

FOR LINE NUMBER: PAGE 77 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Raymond J Zane Esq**

Mailing Address 131 Delaware St

City State Zip Code  
Woobury NJ 08096

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

Name of Employer Occupation  
Zane & Lozuke Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2015

**Transaction ID : SA11AI.9020**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1266 Eagle Rd

City State Zip Code  
New Hope PA 18938

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

Name of Employer Occupation  
Constellation Capital Corp Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : SA11AI.9060**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1300.00

237650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW  
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8830**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE  
ATTN: ALLISON STARMANN

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8899**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8832**

Amount of Each Receipt this Period  
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : SA11C.8831**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN GAS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 400 N. CAPITOL ST., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11C.8833**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 SEVENTH STREET, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8835**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE**

Mailing Address **ONE BUSCH PLACE 202-7**

City **ST. LOUIS** State **MO** Zip Code **63118**

FEC ID number of contributing federal political committee. **C C00034488**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : SA11C.8930**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**ANTHEM, INC. POLITICAL ACTION COMMITTEE (ANTHEM PAC)**

Mailing Address **120 MONUMENT CIRCLE**

City **INDIANAPOLIS** State **IN** Zip Code **46204**

FEC ID number of contributing federal political committee. **C C00197228**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 28 / 2015**

**Transaction ID : SA11C.8836**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**AXEON SPECIALTY PRODUCTS LLC PAC**

Mailing Address **4 PARADISE RD**

City **PAULSBORO** State **NJ** Zip Code **08066**

FEC ID number of contributing federal political committee. **C C00551960**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**09 / 28 / 2015**

**Transaction ID : SA11C.8841**

Amount of Each Receipt this Period  
 1500.00

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

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

4000.00



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

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

FOR LINE NUMBER: PAGE 81 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
BAYADA NURSES INC US POLITICAL ACTION COMMITTEE (AKA BAYADA US PAC)

Mailing Address 290 CHESTER AVENUE

City State Zip Code  
MOORESTOWN NJ 08057

FEC ID number of contributing federal political committee. **C** C00485433

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8842**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
CAESARS ENTERTAINMENT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address ONE CAESARS PALACE DR

City State Zip Code  
LAS VEGAS NV 89109

FEC ID number of contributing federal political committee. **C** C00239947

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8844**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
CAESARS ENTERTAINMENT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address ONE CAESARS PALACE DR

City State Zip Code  
LAS VEGAS NV 89109

FEC ID number of contributing federal political committee. **C** C00239947

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.8846**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 82 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 4160 DUBLIN BLVD., SUITE 100

City DUBLIN State CA Zip Code 94568

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015

**Transaction ID : SA11C.8847**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**CAMPBELL SOUP COMPANY PAC CAMPBELL PAC**

Mailing Address 1 CAMPBELL PLACE MS43K

City CAMDEN State NJ Zip Code 08103

FEC ID number of contributing federal political committee. **C** C00415166

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8848**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2015

**Transaction ID : SA11C.8849**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 14 / 2015
A. Mailing Address 100 INDIANA AVE., N. W.		Transaction ID : SA11C.8883
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00023580		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 01 / 2015
B. Mailing Address 501 THIRD STREET, NW		Transaction ID : SA11C.8851
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00002089		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) COZEN O'CONNOR POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 17 / 2015
C. Mailing Address 1900 MARKET STREET		Transaction ID : SA11C.9009
City PHILADELPHIA	State PA	
FEC ID number of contributing federal political committee. C C00312777		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 84 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11C.8850**

Amount of Each Receipt this Period  
3000.00

**B.** Full Name (Last, First, Middle Initial)  
**DAY & ZIMMERMANN INC FEDERAL PAC (AKA 'DAYPAC - FEDERAL')**

Mailing Address 1500 SPRING GARDEN STREET

City PHILADELPHIA State PA Zip Code 19130

FEC ID number of contributing federal political committee. **C C00341271**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11C.8853**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11C.8855**

Amount of Each Receipt this Period  
1500.00

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

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

5500.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DUANE MORRIS GOVERNMENT COMMITTEE**

Mailing Address 30 SOUTH 17TH STREET

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00364133**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8856**

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
E.I. DU PONT DE NEMOURS COMPANY GOOD GOVERNMENT FUND (DUPONT GOOD GOVERNMENT FUND)

Mailing Address ATTN: CRAIG D. HODGES  
974 CENTRE RD - CRP 730/4360-1

City State Zip Code  
WILMINGTON DE 19805

FEC ID number of contributing federal political committee. **C C00171926**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8857**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND**

Mailing Address 8000 W FLORISSANT AVE  
STATION 2310

City State Zip Code  
ST. LOUIS MO 63136

FEC ID number of contributing federal political committee. **C C00080515**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : SA11C.8859**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8861**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EAST

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2015

**Transaction ID : SA11C.8840**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)**

Mailing Address 5959 LAS COLINAS BLVD

City State Zip Code  
IRVING TX 75039

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11C.8862**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 76 SOUTH MAIN STREET

City State Zip Code  
AKRON OH 44308

FEC ID number of contributing federal political committee. **C C00140855**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8863**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.8864**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GIBBONS P.C. PAC, INC.**

Mailing Address ONE GATEWAY CENTER

City State Zip Code  
NEWARK NJ 07102

FEC ID number of contributing federal political committee. **C C00412635**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8865**

Amount of Each Receipt this Period  
5000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850E

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00100321

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8866**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENCE BLUE CROSS PAC (IBC PAC)**

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 17 / 2015

**Transaction ID : SA11C.8869**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8868**

Amount of Each Receipt this Period  
 1500.00

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

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

4000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

**A.** Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2015

**Transaction ID : SA11C.8874**

Amount of Each Receipt this Period  
 3000.00

Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

**B.** Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8873**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

**C.** Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : SA11C.8870**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A. Mailing Address 65 SPRINGFIELD AVENUE

City State Zip Code  
SPRINGFIELD NJ 07081

FEC ID number of contributing federal political committee. **C C00017194**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

Transaction ID : SA11C.8875

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

B. Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing federal political committee. **C C00000885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

Transaction ID : SA11C.8872

Amount of Each Receipt this Period  
 3000.00

Full Name (Last, First, Middle Initial)  
**LABORERS' INTERNATIONAL UNION**

C. Mailing Address 905 16TH ST NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C70001052**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

Transaction ID : SA11C.8876

Amount of Each Receipt this Period  
 2500.00

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

10500.00

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

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

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

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(check only one)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address **2121 CRYSTAL DRIVE  
SUITE 100**

City State Zip Code  
**ARLINGTON VA 22202**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 17 2015**

**Transaction ID : SA11C.8878**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &**

Mailing Address **9000 MACHINISTS PLACE**

City State Zip Code  
**UPPER MARLBORO MD 20772**

FEC ID number of contributing federal political committee. **C C00002469**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 15 2015**

**Transaction ID : SA11C.8879**

Amount of Each Receipt this Period  
**5000.00**

C. Full Name (Last, First, Middle Initial)  
**MGM RESORTS INTERNATIONAL PAC**

Mailing Address **2350 KERNER BLVD., SUITE 250**

City State Zip Code  
**SAN RAFAEL CA 94901**

FEC ID number of contributing federal political committee. **C C00299321**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 08 2015**

**Transaction ID : SA11C.8880**

Amount of Each Receipt this Period  
**2500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **8500.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 30 2015

**Transaction ID : SA11C.8884**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 30 2015

**Transaction ID : SA11C.8885**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code  
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 12 2015

**Transaction ID : SA11C.8894**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 135
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8895**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9285**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1201 SIXTEENTH ST NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000492

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9283**

Amount of Each Receipt this Period  
 2000.00

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

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

4000.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL GROCERS ASSOCIATION GROCERS PAC**

Mailing Address 1005 NORTH GLEBE ROAD SUITE 250

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508770

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.8886**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC**

Mailing Address 2525 HARRODSBURG ROAD

City LEXINGTON State KY Zip Code 40504

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9286**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9284**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**

Mailing Address 920 MASSACHUSETTS AVE, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8887**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F ST NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11C.8888**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**PEPCO HOLDINGS INC POLITICAL ACTION COMMITTEE AKA PHI PAC**

Mailing Address 701 NINTH STREET NW ROOM EP1202

City WASHINGTON State DC Zip Code 20068

FEC ID number of contributing federal political committee. **C C00385849**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11C.8838**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

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

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11C.8889**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO

Mailing Address 815 16TH ST., NW, SUITE 600

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00003160**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.8843**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**PREIT-RUBIN INC POLITICAL ACTION COMMITTEE**

Mailing Address 200 SOUTH BROAD ST 3RD FLOOR

City PHILADELPHIA State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C C00457606**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8891**

Amount of Each Receipt this Period  
 1500.00

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

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

4000.00



**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 PARK PLAZA

City State Zip Code  
NEWARK NJ 07102

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4890.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11C.8892**

Amount of Each Receipt this Period  
2390.00

**B.** Full Name (Last, First, Middle Initial)  
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 PARK PLAZA

City State Zip Code  
NEWARK NJ 07102

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11C.8893**

Amount of Each Receipt this Period  
110.00

**C.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 30 HUNTER LANE

City State Zip Code  
CAMP HILL PA 17011

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.8897**

Amount of Each Receipt this Period  
1000.00

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

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

3500.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

**A.** Mailing Address 1800 MASSACHUSETTS AVE NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11C.8898**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**STV GROUP INC POLITICAL ACTION COMMITTEE**

**B.** Mailing Address 205 WEST WELSH DRIVE

City State Zip Code  
DOUGLASSVILLE PA 19518

FEC ID number of contributing federal political committee. **C** C00214866

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11C.8900**

Amount of Each Receipt this Period  
 1500.00

Full Name (Last, First, Middle Initial)  
**SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)**

**C.** Mailing Address PO BOX 666

City State Zip Code  
BELLE GLADE FL 33430

FEC ID number of contributing federal political committee. **C** C00254656

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : SA11C.8901**

Amount of Each Receipt this Period  
 1000.00

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

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

5000.00

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

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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : SA11C.8852**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8903**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11C.8904**

Amount of Each Receipt this Period  
2000.00

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

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

6500.00

**SCHEDULE A (FEC Form 3)  
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 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

Mailing Address **P.O. BOX 22945**

City **HIALEAH** State **FL** Zip Code **33002**

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 16 / 2015**

**Transaction ID : SA11C.8906**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP**

Mailing Address **THREE PARK PLACE**

City **ANNAPOLIS** State **MD** Zip Code **21401**

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 12 / 2015**

**Transaction ID : SA11C.8890**

Amount of Each Receipt this Period  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **1101 PENNSYLVANIA AVE, NW  
10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 30 / 2015**

**Transaction ID : SA11C.8905**

Amount of Each Receipt this Period  
 1000.00

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

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

7000.00

123000.00

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

FEC ID number of contributing federal political committee. **C H4NJ01084**

Name of Employer Occupation  
US Federal Government Member, US House of Representatives

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**15161.83**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**09 20 2015**

**Transaction ID : SA13A.9324**

Amount of Each Receipt this Period  
**15161.83**

Loan - See Memo Text

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**15161.83**

**15161.83**

: 97 `A -G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A -N5 HCB

Form/Schedule: SA13A

Transaction ID : SA13A.9324

Personal loan securing campaign vehicle lease term obligation beyond current office term. See Transaction ID: SB/17.9236.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 135
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

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

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

FEC ID number of contributing federal political committee. **C** H4NJ01084

Name of Employer Occupation  
US Federal Government Member, US House of Representatives

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date  
15197.71

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 30 2015

**Transaction ID : SA15.9319**

Amount of Each Receipt this Period  
35.88

Reimbursement for Personal Use of Campaign Vehicle

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

35.88

35.88

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 0.40	
City Somerville	State MA	Zip Code 02144	Transaction ID : SB17.8807	
Purpose of Disbursement Processing Fee		003	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 59.25	
City Somerville	State MA	Zip Code 02144	Transaction ID : SB17.8808	
Purpose of Disbursement Processing Fee		003	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 59.25	
City Somerville	State MA	Zip Code 02144	Transaction ID : SB17.8809	
Purpose of Disbursement Processing Fee		003	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	118.90
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8810</b>
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)	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8812</b>
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)	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8813</b>
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>SUBTOTAL</b> of Disbursements This Page (optional).....	177.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 39.50
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8814</b>
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)	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 19.75
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8815</b>
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)	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8816</b>
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>SUBTOTAL</b> of Disbursements This Page (optional).....	118.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 29.63
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee	
Candidate Name	003 Category/Type	<b>Transaction ID : SB17.8817</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 19.75
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee	
Candidate Name	003 Category/Type	<b>Transaction ID : SB17.8818</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement	
Candidate Name	003 Category/Type	<b>Transaction ID : SB17.8819</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	108.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 3.95 <b>Transaction ID : SB17.8820</b>
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 19.75 <b>Transaction ID : SB17.8821</b>
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 0.40 <b>Transaction ID : SB17.8822</b>
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24.10
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 7.90
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		Transaction ID : SB17.8823
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)	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 0.20
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		Transaction ID : SB17.8824
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)	

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 2647.71
City Newark State NJ Zip Code 07101	Purpose of Disbursement Candidate Expenses - Itemized Below Category/Type	
Candidate Name		Transaction ID : SB17.9274
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>SUBTOTAL</b> of Disbursements This Page (optional).....	2655.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Joe's Seafood</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 750 15th St NW		Amount of Each Disbursement this Period 251.92
City Washington State DC Zip Code 20005	Purpose of Disbursement Meeting / Meal Expense Candidate Name Category/Type 001	
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>Transaction ID : SB17.9274.3</b> <b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 1381.25
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Reception Expense Candidate Name Category/Type 003	
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>Transaction ID : SB17.9274.9</b> <b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 306.85
City Washington State DC Zip Code 20001	Purpose of Disbursement Meeting / Meal Candidate Name Category/Type 001	
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>Transaction ID : SB17.9274.10</b> <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 2230 Marlton Pike West		Amount of Each Disbursement this Period 242.86
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Office Supplies Expense	[MEMO ITEM]
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Caffè Aldo Lamberti</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2015
Mailing Address 2011 Route 70 West		Amount of Each Disbursement this Period 243.03
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Meeting / Meal Expense	[MEMO ITEM]
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ameriprise Financial / American Enterprise</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address Ameriprise Financial Center		Amount of Each Disbursement this Period 75.00
City Minneapolis	State MN	
Zip Code 55474	Purpose of Disbursement Interest Payment	[MEMO ITEM]
Candidate Name	Category/ Type 009	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address 499 South Capitol St SW Suite 422		Amount of Each Disbursement this Period 5166.12
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting Services Expense - Fundraising 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9213</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address 499 South Capitol St SW Suite 422		Amount of Each Disbursement this Period 4681.16
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting Services Expense - Fundraising 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9224</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Angerholzer Broz Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address 499 South Capitol St SW Suite 422		Amount of Each Disbursement this Period 6556.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting Services Expense - Fundraising 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9257</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16403.28
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 265.68
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telecommunications Expense	<b>Transaction ID : SB17.9217</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 236.41
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telecommunications Expense	<b>Transaction ID : SB17.9235</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 862.66
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telecommunications Expense	<b>Transaction ID : SB17.9260</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1364.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Caffè Aldo Lamberti</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address 2011 Route 70 West		Amount of Each Disbursement this Period 14153.20
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Fundraising Reception Expense	<b>Transaction ID : SB17.9270</b>
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jewish Community Voice</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address 1301 Springdale Rd Suite 250		Amount of Each Disbursement this Period 353.30
City Cherry Hill	State NJ	
Zip Code 08003	Purpose of Disbursement Donation / Advertisement	<b>Transaction ID : SB17.9259</b>
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Listrak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.00
City Lititz	State PA	
Zip Code 17543	Purpose of Disbursement Telecommunications Expense	<b>Transaction ID : SB17.9212</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14881.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Listrak</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.00
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Category/Type 001	<b>Transaction ID : SB17.9222</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Listrak</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.00
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Category/Type 001	<b>Transaction ID : SB17.9243</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Listrak</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.00
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Category/Type 001	<b>Transaction ID : SB17.9271</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mall Chevrolet</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address 75 Haddonfield Rd		Amount of Each Disbursement this Period 10000.00
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Campaign Vehicle - Down Payment	<b>Transaction ID : SB17.9231</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mall Chevrolet</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 75 Haddonfield Rd		Amount of Each Disbursement this Period 17997.92
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Campaign Vehicle - Balance	<b>Transaction ID : SB17.9236</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. NJ State AFL CIO</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address 106 West State St		Amount of Each Disbursement this Period 500.00
City Trenton	State NJ	
Zip Code 08608	Purpose of Disbursement Donation / Advertisement	<b>Transaction ID : SB17.9214</b>
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	28497.92
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9236

Total campaign vehicle lease obligation is \$27,881.42, \$15,161.83 of which is secured by a personal loan from Donald W. Norcross for that period of the campaign vehicle lease term obligation beyond the current office term. See Transaction ID: SC/10.9324.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Pam's List</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 1401 Washington St		Amount of Each Disbursement this Period 500.00
City Hoboken	State NJ	
Zip Code 07030	Purpose of Disbursement Donation / Sponsor	<b>Transaction ID : SB17.9266</b>
Candidate Name	012 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Anthony R Pittman Jr.</b>		Date of Disbursement MM / DD / YYYY 09 / 22 / 2015
Mailing Address 20 Scenic View Dr		Amount of Each Disbursement this Period 2500.00
City Sicklerville	State NJ	
Zip Code 08081	Purpose of Disbursement Consulting Services Expense	<b>Transaction ID : SB17.9265</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Progressive Auto Insurance</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address PO Box 413		Amount of Each Disbursement this Period 3734.00
City Marlton	State NJ	
Zip Code 08053	Purpose of Disbursement Auto Insurance Expense	<b>Transaction ID : SB17.9233</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6734.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Progressive Auto Insurance</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address PO Box 413		Amount of Each Disbursement this Period 46.00
City Marlton	State NJ	
Zip Code 08053	Purpose of Disbursement Auto Insurance Expense	<b>Transaction ID : SB17.9261</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RP Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address PO Box 3540		Amount of Each Disbursement this Period 5000.00
City Cherry Hill	State NJ	
Zip Code 08034	Purpose of Disbursement Consulting Services Expense - Fundraising	<b>Transaction ID : SB17.9220</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. RP Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address PO Box 3540		Amount of Each Disbursement this Period 5000.00
City Cherry Hill	State NJ	
Zip Code 08034	Purpose of Disbursement Consulting Services Expense - Fundraising	<b>Transaction ID : SB17.9239</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10046.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 135	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RP Consulting, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2015
Mailing Address PO Box 3540		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17.9258</b>
City Cherry Hill	State NJ	
Zip Code 08034	Purpose of Disbursement Consulting Services Expense - Fundraising	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 2230 Marlton Pike West		Amount of Each Disbursement this Period 10.14 <b>Transaction ID : SB17.9248</b>
City Cherry Hill	State NJ	
Zip Code 08002	Purpose of Disbursement Office Supplies Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 152.79 <b>Transaction ID : SB17.8795</b>
City Lewiston	State ME	
Zip Code 04243	Purpose of Disbursement Interest Payment	Category/ Type 009
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5162.93
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 67.80
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Interest Payment 009 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8796</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 154.12
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Interest Payment 009 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8797</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 72.74
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Interest Payment 009 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8800</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	294.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 135		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2015
Mailing Address 1701 Route 70 East		Amount of Each Disbursement this Period 20.00
City Cherry Hill	State NJ	
Zip Code 08034	Purpose of Disbursement Bank Fee	<b>Transaction ID : SB17.9226</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 114.61
City Lewiston	State ME	
Zip Code 04243	Purpose of Disbursement Interest Payment	<b>Transaction ID : SB17.8801</b>
Candidate Name	009 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 89.97
City Lewiston	State ME	
Zip Code 04243	Purpose of Disbursement Interest Payment	<b>Transaction ID : SB17.8802</b>
Candidate Name	009 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	224.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 13.01
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Interest Payment 009 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8804</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 132.94
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Interest Payment 009 Category/Type	
Candidate Name		<b>Transaction ID : SB17.8805</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Trenton Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address 1150 Southard St		Amount of Each Disbursement this Period 7371.67
City Trenton State NJ Zip Code 08638	Purpose of Disbursement Printing & Mailing Expense - Fundraising 003 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9242</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7517.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 135		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 63.43
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Express Mail Expense	Category/Type 001	<b>Transaction ID : SB17.9218</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 41.83
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Express Mail Expense	Category/Type 001	<b>Transaction ID : SB17.9219</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 15.16
City Philadelphia	State PA Zip Code 19170	
Purpose of Disbursement Express Mail Expense	Category/Type 001	<b>Transaction ID : SB17.9221</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	120.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 15.16
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Express Mail Expense 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9227</b>
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 15.08
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Express Mail Expense 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9238</b>
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address PO Box 7247-0244		Amount of Each Disbursement this Period 20.79
City Philadelphia State PA Zip Code 19170	Purpose of Disbursement Express Mail Expense 001 Category/Type	
Candidate Name		<b>Transaction ID : SB17.9247</b>
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 135			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UPS</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015		
Mailing Address PO Box 7247-0244			Amount of Each Disbursement this Period 30.16		
City Philadelphia	State PA	Zip Code 19170	Transaction ID : SB17.9256		
Purpose of Disbursement Express Mail Expense		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. US House of Representatives Gift Shop</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015		
Mailing Address Longworth Bldg			Amount of Each Disbursement this Period 55.20		
City Washington	State DC	Zip Code 20515	Transaction ID : SB17.9223		
Purpose of Disbursement Gift Expense		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. US Postmaster (Collingswood)</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015		
Mailing Address Haddon Ave			Amount of Each Disbursement this Period 164.00		
City Collingswood	State NJ	Zip Code 08108	Transaction ID : SB17.9216		
Purpose of Disbursement Postage Expense		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	249.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 135			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. US Postmaster (Trenton)</b>		Date of Disbursement
Mailing Address 680 US Hwy 130		MM / DD / YYYY 08 / 01 / 2015
City Trenton	State NJ	Zip Code 08650
Purpose of Disbursement Postage Expense	Amount of Each Disbursement this Period 4249.65	
Candidate Name	Transaction ID : SB17.9225	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 003
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4249.65
<b>TOTAL</b> This Period (last page this line number only).....	100201.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 135	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ameriprise Financial / American Enterprise</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015	
Mailing Address Ameriprise Financial Center			Amount of Each Disbursement this Period 20000.00	
City Minneapolis	State MN	Zip Code 55474	Transaction ID : SB19A.8792	
Purpose of Disbursement Loan - Principal Payment		009 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TD Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2015	
Mailing Address PO Box 8400			Amount of Each Disbursement this Period 372.22	
City Lewiston	State ME	Zip Code 04243	Transaction ID : SB19A.8794	
Purpose of Disbursement Loan - Principal Payment		009 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. TD Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015	
Mailing Address PO Box 8400			Amount of Each Disbursement this Period 10370.15	
City Lewiston	State ME	Zip Code 04243	Transaction ID : SB19A.8799	
Purpose of Disbursement Loan - Principal Payment		009 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30742.37
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 135	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 25312.49 <b>Transaction ID : SB19A.8803</b>
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Loan - Principal Payment Candidate Name Category/Type 009	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TD Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address PO Box 8400		Amount of Each Disbursement this Period 30891.49 <b>Transaction ID : SB19A.8806</b>
City Lewiston State ME Zip Code 04243	Purpose of Disbursement Loan - Principal Payment Candidate Name Category/Type 009	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56203.98
<b>TOTAL</b> This Period (last page this line number only).....	86946.35

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : **SC/10.6722**

**DONALD NORCROSS FOR CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**DONALD W NORCROSS**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1 MARKET STREET UNIT 522

City State ZIP Code  
CAMDEN NJ 08102

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
70000.00 70000.00 0.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y 4.00 % (apr)  Yes  No  
10 15 / 2014 DEMAND

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ [ ] 0.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.7255

**DONALD NORCROSS FOR CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
**DONALD W NORCROSS**

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1 MARKET STREET UNIT 522

City State ZIP Code  
CAMDEN NJ 08102

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
80000.00 80000.00 0.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
10 / 21 / 2014 DEMAND 6.75 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 0.00  
**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **DONALD NORCROSS FOR CONGRESS** Transaction ID : **SC/10.9324**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>DONALD W NORCROSS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1 MARKET STREET UNIT 522		

City	State	ZIP Code
CAMDEN	NJ	08102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15161.83	0.00	15161.83

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 20 / Y 2015 Y	M M / D D / Y DEMAND Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....	15161.83
<b>TOTALS</b> This Period (last page in this line only).....	15161.83

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.9324

Personal loan securing campaign vehicle lease term obligation beyond current office term. See Transaction ID: SB/17.9236.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
152.79

Transaction ID : SD10.8637

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 152.79 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8787

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
75.00 75.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8788

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
221.92 221.92 0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DONALD W NORCROSS</b>		Nature of Debt (Purpose): Interest Due on Loan
Mailing Address 1 MARKET STREET UNIT 522		
City	State	Zip Code
CAMDEN	NJ	08102

Outstanding Balance Beginning This Period	Transaction ID : SD10.8789	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="187.35"/>	<input type="text" value="187.35"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DONALD W NORCROSS</b>		Nature of Debt (Purpose): Interest Due on Loan
Mailing Address 1 MARKET STREET UNIT 522		
City	State	Zip Code
CAMDEN	NJ	08102

Outstanding Balance Beginning This Period	Transaction ID : SD10.8790	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="102.98"/>	<input type="text" value="102.98"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DONALD W NORCROSS</b>		Nature of Debt (Purpose): Interest Due on Loan
Mailing Address 1 MARKET STREET UNIT 522		
City	State	Zip Code
CAMDEN	NJ	08102

Outstanding Balance Beginning This Period	Transaction ID : SD10.8791	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="132.94"/>	<input type="text" value="132.94"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>