

THE COMMITTEE FOR
Working Families

EXECUTIVE COMMITTEE

Senator John Adler
Hon. Thomas Giblin
Mayor James E. McGreevey
Rep. Robert Menendez
Assemblyman Donald Tucker
Assemblywoman Loretta Weinberg

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

AUG 2 5 32 PM '99

Tanya Smith
Executive Director
Gary B. Inffet
Chair, Board of Trustees
Paul Levinsohn
Treasurer/Counsel

July 31, 1999

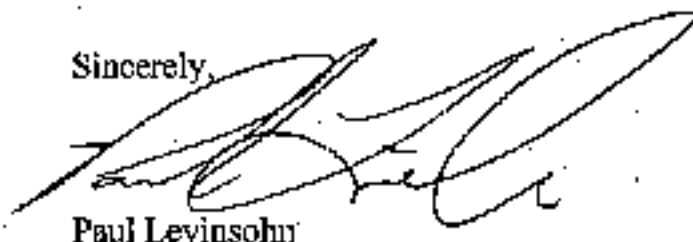
Ms. Debbie Chacona, Senior Reports Analyst
Reports Analysis Division
Federal Election Commission
999 E. Street, N.W.
Washington, D.C. 20463

Dear Ms. Chacona:

Attached is the July 31 Mid Year Report covering the period of January 1, 1999 through June 30, 1999.

If you have any questions, please give me a call at (732) 855-6431.

Sincerely,



Paul Levinsohn

**For Other Than An Authorized Committee
(Summary Page)**

USE FEC MARKING LABEL

TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>The Committee for Working Families</i>		PREVIOUS ELECTION COMMISSION MAIL ROOM AUG 7 3 32 PM '99	
ADDRESS (number and street) ☒ Check if different than previously reported <i>90 Woodbridge Center Dr.</i>		2. FEC IDENTIFICATION NUMBER <i>C00333591</i>	
CITY, STATE and ZIP CODE <i>Woodbridge, NJ 07095</i>		3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

(b) April 15 Quarterly Report

☐ July 15 Quarterly Report

October 15 Quarterly Report

☐ January 31 Year End Report☒ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20☐ March 20☐ April 20

May 20

☐ June 20

☐ July 20

☐ August 20

☐ September 20☐ October 20

November 20

☐ December 20☐ January 31

☐ 12-Day Pre-Election Report for the _____
(Type of Election)

election on _____ in the State of _____

☐ 90-Day Post-Election Report following the General Election

on _____ in the State of _____

(b) Is this Report an Amendment?

☐ YES☐ NO

5. Covering Period 1/1/99 through 6/30/99

6. (a) Cash on Hand January 1, 1999

(b) Cash on Hand at Beginning of Reporting Period

(c) Total Receipts (from Line 19)

(d) Subtotal (add Lines 8(b) and 8(c) for Column A and

Lines 6(b) and 6(c) for Column B)

7. Total Disbursements (from Line 30)

8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)),

9. **Debts and Obligations Owed TO the Committee**
(Itemize all on Schedule C and/or Schedule D)

10. **Debt and Obligations Owed BY the Committee**
(Itemize all on Schedule C and/or Schedule D)

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

Signature of Treasurer

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.

FEC FORM 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE

The Committee for Working Families

REPORT COVERING PERIOD

FROM 1/1/99

TO: 6/30/99

I. Receipts

	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	260,100.00	548,950.00
ii. Unitemized	0	0
iii. Total (add i and ii)	260,100.00	548,950.00
b. Political Party Committees	2,000.00	7,000.00
c. Other Political Committees (such as PACs)	10,000.00	24,000.00
d. Total Contributions (add a iii, b and c)	272,100.00	579,950.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	43.10	43.10
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	272,143.10	579,993.10
20. Total Federal Receipts (subtract line 18 from line 19)	272,143.10	579,993.10

II. Disbursements

21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0	0
ii. Non-Federal Share	0	0
b. Other Federal Operating Expenditures	83,798.18	315,660.20
c. Total Operating Expenditures (add a i, a ii, and b)	83,798.18	315,660.20
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	24,212.00	68,832.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	10,500.00	14,500.00
b. Political Party Committees	0	4,000.00
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c)	10,500.00	18,500.00
29. Other Disbursements	4,447.00	9,527.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	122,957.18	412,519.20
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	122,957.18	412,519.20

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans)(from line 11d)	272,100.00	579,950.00
33. Total Contribution Refunds (from line 28d)	10,500.00	18,500.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	261,600.00	561,450.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	83,798.18	315,660.20
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35)	83,798.18	315,660.20

SCHEDULE A Contributions: Individual Taxpayers
ITEMIZED RECEIPTS
 Political Committee

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

PAGE 1 OF 17
 FOR LINE NUMBER
11 (A1)

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code John V. Rawson 1330 Route 206 Skillman, NJ 08558	Name of Employer Trooper Foods P.O. Box 670 Rocky Hill, NJ 08553 Occupation BUSINESSMAN	Date (month, day, year) 1/29/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Harbortown Terrace, LLC P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership Occupation	Date (month, day, year) 2/12/99 (see Attribution below)	Amount of Each Receipt this Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
C. Full Name, Mailing Address and ZIP Code Jack Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above Occupation	Date (month, day, year)	Amount of Each Receipt this Period 2,500.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
D. Full Name, Mailing Address and ZIP Code Deans Pond Crossing, LLC P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership Occupation	Date (month, day, year) 2/12/99 (see Attribution below)	Amount of Each Receipt this Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
E. Full Name, Mailing Address and ZIP Code Josef Paradis P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above Occupation	Date (month, day, year)	Amount of Each Receipt this Period 2,500.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
F. Full Name, Mailing Address and ZIP Code Pike Run, LLC P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership Occupation	Date (month, day, year) 2/12/99 (see Attribution below)	Amount of Each Receipt this Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
G. Full Name, Mailing Address and ZIP Code Henry Stein P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above Occupation	Date (month, day, year)	Amount of Each Receipt this Period 2,500.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		

SUBTOTAL of Receipts This Page (optional)

12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions: Individual/Other than
Political Committee

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

PAGE **2** OF **7**
FOR LINE NUMBER
11(A)

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Edison Woods Commercial Assoc. P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 2/12/99	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see Attribution below)	Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code Fred Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year)	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (memo)	Aggregate Year-to-Date > \$ 2,500.00	
C. Full Name, Mailing Address and ZIP Code Green Plaza Association P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 2/12/99	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see Attribution below)	Aggregate Year-to-Date > \$ 2,500.00	
D. Full Name, Mailing Address and ZIP Code David Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year)	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (memo)	Aggregate Year-to-Date > \$ 2,500.00	
E. Full Name, Mailing Address and ZIP Code Trafalgar Association P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 2/12/99	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see Attribution below)	Aggregate Year-to-Date > \$ 2,500.00	
F. Full Name, Mailing Address and ZIP Code Arie Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year)	Amount of Each Receipt This Period 2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (memo)	Aggregate Year-to-Date > \$ 2,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

7,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions: Individual Other than
Political Committee

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

PAGE **3** OF **17**
FOR LINE NUMBER
1163

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Hilltop Manor Association P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership, P Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 2/12/99 (see attribution below)	Amount of Each Receipt this Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Arie Halpern P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 	Amount of Each Receipt this Period 2,500.00 (memo)
C. Full Name, Mailing Address and ZIP Code Edison Village Association P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 2/12/99 (see attribution below)	Amount of Each Receipt this Period 2,500.00
D. Full Name, Mailing Address and ZIP Code Gladys Halpern P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 	Amount of Each Receipt this Period 2,500.00 (memo)
E. Full Name, Mailing Address and ZIP Code John J. Stefani 531 Stagecoach Road Clarksburg, NJ 08510 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer CME Associates 1460 Route 9 South Howell, NJ 07731 Occupation Engineer Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 2/19/99	Amount of Each Receipt this Period 5,000.00
F. Full Name, Mailing Address and ZIP Code Hilda A. Irizarry 397 Tuckahoe Road Vineland, NJ 08360 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer NJ State Parole Board Trenton, NJ 08618 Occupation Juvenile Hearing Officer Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 2/19/99	Amount of Each Receipt this Period 100.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

10,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A Contributions: **Individuals** **ITEMIZED RECEIPTS**
Political Committee

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

PAGE **4** OF **17**
FOR LINE NUMBER
11(A)

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Edison Glen Association P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 3/1/99 (see Attribution below)	Amount of Each Receipt This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Murray Halpern P.O. Box 457 Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 	Amount of Each Receipt This Period 1,000.00 (MEMO)
C. Full Name, Mailing Address and ZIP Code Schering-Plough PAC 1 Giralda Farms Madison, NJ 07940 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 3/5/99	Amount of Each Receipt This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge, NJ 08857 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wilentz, Goldman & Spitzer 90 Woodbridge Center Drive Woodbridge, NJ 07095 Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 4/16/99	Amount of Each Receipt This Period 5,000.00
E. Full Name, Mailing Address and ZIP Code John V. Rawson 1330 Route 206 Skillman, NJ 08558 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Trooper Foods P.O. Box 670 Rocky Hill, NJ 08553 Occupation Businessman Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) 5/10/99	Amount of Each Receipt This Period 5,000.00
F. Full Name, Mailing Address and ZIP Code James K. Wolosoff 120 Wood Avenue S Iselin, NJ 08830 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Hemisphere Group 120 Wood Avenue S Iselin, NJ 08830 Occupation Real Estate Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/10/99	Amount of Each Receipt This Period 5,000.00
G. Full Name, Mailing Address and ZIP Code Rich Levinson 2 Lincoln Highway Edison, NJ 08818 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Levinson, Axelrod 2 Lincoln Highway Edison, NJ 08818 Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/26/99	Amount of Each Receipt This Period 5,000.00

SUBTOTAL of Receipts This Page (optional)

26,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions: Individual/Other than
Political Committee

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
1163

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NAME OF COMMITTEE (in Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Jack Bendheim 1 Parker Plaza Fort Lee, NJ 07024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Phillip Brothers Chemical 1 Parkway Plaza Ft. Lee, NJ 07024 Occupation Resident Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/26/99	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Lester Fisher 2 Manhattanville Road Purchase, NY 10577 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Olnick & Fisher 2 Manhattanville Road Purchase, NY 10577 Occupation REAL ESTATE Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/26/99	Amount of Each Receipt this Period 5,000.00
C. Full Name, Mailing Address and ZIP Code Dr. William Martin 725 N. Wood Avenue Linden, NJ 07036 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Chiropractic & Sports Rehab Center 725 N. Wood Avenue Linden, NJ 07036 Occupation Physician Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 5/26/99	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and ZIP Code William Miley 16 N. Weymouth Avenue Ventnor, NJ 08406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Local 54 203-205 N. Sovereign Ave. Atlantic City, NJ 08401 Occupation BUSINESS AGENT Aggregate Year-to-Date > \$ 100.00	Date (month, day, year) 5/26/99	Amount of Each Receipt this Period 100.00
E. Full Name, Mailing Address and ZIP Code Granite Partners, LLC 600 Madison Avenue New York, NY 10022 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/3/99 (see contribution below)	Amount of Each Receipt this Period 5,000.00
F. Full Name, Mailing Address and ZIP Code Larry Ruben 600 Madison Avenue New York, NY 10022 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 	Amount of Each Receipt this Period 5,000.00 (in memo)
G. Full Name, Mailing Address and ZIP Code Patrick J. Kerzic 17 Opatut Morganville, NJ 07751 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Thrift Investment P.O. Box 638 Fords, NJ 08863 Occupation FINANCE-CEO Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 6/3/99	Amount of Each Receipt this Period 2,000.00

SUBTOTAL of Receipts This Page (optional)

22,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions: Individual/Other than
Political Committee

Use separate schedule(s)
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Detailed Summary Page

PAGE **6** OF **17**
FOR LINE NUMBER
11(A)

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Orin Kramer 261 Glenwood Road Englewood, NJ 07631	Name of Employer Kramer Spellman 2050 Center Avenue Fort Lee, NJ 07024 Occupation Investor	Date (month, day, year) 6/3/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Dorothy's Care, PC 10 N. Wood Avenue Linden, NJ 07036	Name of Employer Occupation	Date (month, day, year) 6/3/99	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code North Brunswick Manor P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership Occupation	Date (month, day, year) 6/10/99 (see Attribution below)	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
D. Full Name, Mailing Address and ZIP Code Shelley Paradis P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above Occupation	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
E. Full Name, Mailing Address and ZIP Code Trafalgar Association P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership Occupation	Date (month, day, year) 6/10/99 (see Attribution below)	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
F. Full Name, Mailing Address and ZIP Code Sam Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above Occupation	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
Contributions: Individual/Other than
Political Committee

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

PAGE 7 OF 17
FOR LINE NUMBER
11(A)

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Edison Village Association P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code Eva Halpern P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt this Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code Riverview Villas @ Renaissance P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code Nanette Brenner P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt this Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
E. Full Name, Mailing Address and ZIP Code The Meadows @ Renaissance P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Partnership	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
F. Full Name, Mailing Address and ZIP Code Bella Savran P.O. Box 457 Woodbridge, NJ 07095	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt this Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code De Luca Family Chiropractic 3384 Highway 9 South Old Bridge, NJ 08857	Name of Employer (see attribution below)	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
Contributions: Individual/Other than
Political Committee

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

PAGE **8** OF **17**
FOR LINE NUMBER
11(a)

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Paul T. Von Nessi 405 Northfield Avenue West Orange, NJ 07052 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Law Office of Paul T. Von Nessi 405 Northfield Avenue West Orange, NJ 07052 Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Druckman & Hernandez 575 Morris Avenue Elizabeth, NJ 07208 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/10/99 (see Attribution below)	Amount of Each Receipt this Period 1,000.00 (see Attribution below)
C. Full Name, Mailing Address and ZIP Code Pursuing Partnership Attribution Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Law Offices of Schibell & Mennie P.O. Box 2237 Ocean, NJ 07712 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) 6/10/99 (see Attribution below)	Amount of Each Receipt this Period 10,000.00 (see Attribution below)
E. Full Name, Mailing Address and ZIP Code Richard Schibell P.O. Box 2237 Ocean, NJ 07712 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
F. Full Name, Mailing Address and ZIP Code John G. Mennie P.O. Box 2237 Ocean, NJ 07712 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
G. Full Name, Mailing Address and ZIP Code Michael Palin 740 Park Avenue New York, NY 10021 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Palin Enterprises 969 3rd Avenue New York, NY 10022 Occupation Business Owner Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/10/99	Amount of Each Receipt this Period 5,000.00

SUBTOTAL of Receipts This Page (optional)

17,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **Contributions: Individual Other than Political Committee** **ITEMIZED RECEIPTS**

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

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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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Connell, Foley & Geiser 85 Livingston Avenue Roseland, NJ 07068 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/10/99 (see attribution below)	Amount of Each Receipt this Period 5,000.00
B. Full Name, Mailing Address and ZIP Code PAUL FADER 85 Livingston Avenue Roseland, NJ 07068 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
C. Full Name, Mailing Address and ZIP Code Robert Harman 12 Precedent Place Manalapan, NJ 07726 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Exec. Director Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,000.00
D. Full Name, Mailing Address and ZIP Code Dennis M. Toft 85 Old Cannon Road Berkeley Heights, NJ 07922 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 1,500.00
E. Full Name, Mailing Address and ZIP Code Maria C. Toft 85 Old Cannon Road Berkeley Heights, NJ 07922 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer UMDNJ-NJMS 30 S. Orange Avenue Newark, NJ 07102 Occupation Physician Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 1,500.00
F. Full Name, Mailing Address and ZIP Code Robyn Schlossberg 42 Tremont Terrace Livingston, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Smith, Barney 150 J.R.K. Parkway Short Hills, NJ 07078 Occupation Stock broker Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,000.00
G. Full Name, Mailing Address and ZIP Code Daniel Schwartz 43 Tremont Terrace Livingston, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,000.00

SUBTOTAL of Receipts This Page (optional)

17,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
Contributions: Individual/Other than
Political Committee

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

PAGE 10 OF 17
FOR LINE NUMBER 11(A)

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Armen Shahinian 429 Stonycroft Road Ridgewood, NJ 07450 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 1,500.00
B. Full Name, Mailing Address and ZIP Code Linda D. Biancardi 405 Fieldstone Court Franklin Lakes, NJ 07417 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,000.00
C. Full Name, Mailing Address and ZIP Code Plainfield Neurology Associates 908 Oaktree Road S. Plainfield, NJ 07080 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,200.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,200.00
D. Full Name, Mailing Address and ZIP Code Martin L. Wiener 108 N. Ashby Avenue Livingston, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Rd. Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 3,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 3,000.00
E. Full Name, Mailing Address and ZIP Code Arthur S. Goldstein 1 Oxbow Place Upper Saddle River, NJ 07458 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Wolff & Samson 5 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/15/99	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Dr. Michael P. Gold 22 Old Farmstead Road Chester, NJ 07930 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-Employed 72 Van Reipen Avenue Jersey City, NJ 07306 Occupation Physician Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Philmar Medical Associates, PA P.O. Box 116 Marlton, NJ 08053 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

13,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A Contributions: Individual **REMOVED RECEIPTS**
Political Committee

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

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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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Gill & Charnas 100 West Pond Road Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/24/99 (see attribution below)	Amount of Each Receipt This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Peter Charnas 100 West Pond Road Woodbridge, NJ 07095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Attorney Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt This Period 5,000.00 (memo)
C. Full Name, Mailing Address and ZIP Code Philmar Medical Associates, PA P.O. Box 116 Marlton, NJ 08053 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Darbin Management Corp. P.O. Box 2858 Cherry Hill, NJ 08034 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Dr. James Garabo 1042 Raritan Road Clark, NJ 07066 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-Employed 1042 Raritan Road Clark, NJ 07066 Occupation Physician Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/24/99	Amount of Each Receipt This Period 500.00
F. Full Name, Mailing Address and ZIP Code Essential Chiropractic Care, PC 2101 Bergenline Avenue Union City, NJ 07087 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 6/24/99	Amount of Each Receipt This Period 500.00
G. Full Name, Mailing Address and ZIP Code Ben A. Plotkin 168 Western Drive Short Hills, NJ 07078 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Ryan, Beck & Co. 220 S. Orange Avenue Livingston, NJ 07039 Occupation Investment - CEO Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt This Period 1,000.00

SUBTOTAL of Receipts This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

Contributions: Individual Other than Political Committee

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

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FOR LINE NUMBER 11(A)

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Montgomery, McCracken Walker 123 South Broad Street Philadelphia, PA 19109 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation LAWYERS Aggregate Year-to-Date > \$ 3,200.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 3,200.00 (see attached letter for contribution)
B. Full Name, Mailing Address and ZIP Code Charles C. Carella 6 Becker Farm Road Roseland, NJ 07068 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Carella, Byrne 6 Becker Farm Road Roseland, NJ 07068 Occupation Attorney Aggregate Year-to-Date > \$ 3,200.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 3,200.00
C. Full Name, Mailing Address and ZIP Code W. Barry Rank 12 Fox Run Road Pennington, NJ 08534 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-Employed 100 Nassau Park Blvd. Princeton, NJ 08540 Occupation REAL ESTATE / ATTORNEY Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Francis L. Doyle III 944 Garrett Mill Road Newtown Square, PA 19073 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Doyle Consulting 2005 Market Street Philadelphia, PA 19103 Occupation INSURANCE Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and ZIP Code Buttafuoco, Karpft & Arce 64-72 Schuyler Avenue Kearny, NJ 07032 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 5,000.00 (see contribution below)
F. Full Name, Mailing Address and ZIP Code Joseph Buttafuoco 64-72 Schuyler Avenue Kearny, NJ 07032 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt this Period 5,000.00 (memo)
G. Full Name, Mailing Address and ZIP Code Thomas A. Zelante 7 Stoney Brook Way Morris Township, NJ 07960 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Seeber, Bowsky & Zelante 1 E. Clinton Street Dover, NJ 07802 Occupation Attorney Aggregate Year-to-Date > \$ 1,800.00	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 1,800.00

SUBTOTAL of Receipts This Page (optional)

20,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions: Individual/Other than
Political Committee

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

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11(A)

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Darbin Management Corp. P.O. Box 2858 Cherry Hill, NJ 08034	Name of Employer Occupation 	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$2,000.00		
B. Full Name, Mailing Address and ZIP Code Neil Mullin 240 Claremont Avenue Montclair, NJ 07042	Name of Employer Smith, Mullin 240 Claremont Avenue Montclair, NJ 07042 Occupation Attorney	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$5,000.00		
C. Full Name, Mailing Address and ZIP Code Dr. Richard Ryan 1043 Raritan Road Clark, NJ 07068	Name of Employer Self-Employed 1043 Raritan Road Clark, NJ 07068 Occupation Physician	Date (month, day, year) 6/24/99	Amount of Each Receipt this Period 500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$500.00		
D. Full Name, Mailing Address and ZIP Code Kenneth M. Jarin 123 S. Broad Street Philadelphia, PA 19109	Name of Employer Montgomery, McCracken 123 S. Broad Street Philadelphia, PA 19109 Occupation Attorney	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period 1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code Adam Kaufman 29 F Chicopee Drive Princeton, NJ 08540	Name of Employer Capital Public Affairs 120 Albany Street N. Brunswick, NJ 08903 Occupation Lobbyist	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$5,000.00		
F. Full Name, Mailing Address and ZIP Code Lloyd D. Levenson 107 S. Argyle Avenue Margate, NJ 08402	Name of Employer Cooper, Perskie 1125 Atlantic Avenue Atlantic City, NJ 08401 Occupation Attorney	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$5,000.00		
G. Full Name, Mailing Address and ZIP Code Frank A. Tobias, Jr. 1107 Convery Blvd. Perth Amboy, NJ 08861	Name of Employer Self-Employed 1107 Convery Blvd. Perth Amboy, NJ 08861 Occupation Attorney	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period 600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$5,600.00		

SUBTOTAL of Receipts This Page (optional)

16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

Contributions: Other than Political Comm. / Individuals

11 (A)

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NAME OF COMMITTEE (in full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert M. Kaye 60 Monmouth Park Hwy. W. Long Branch, NJ 07764	PRC Management 60 Monmouth Park Hwy. W. Long Branch, NJ 07764	6/30/99	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation BANKING	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wallkill Apartments Asso. 26 Columbia Turnpike Florham Park, NJ 07932	partnership	6/30/99	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Stadtmauer 10 Highview Drive Livingston, NJ 07039	Above		5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Developer	Aggregate Year-to-Date > \$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Westminster Sales & Marketing 26 Columbia Turnpike Florham Park, NJ 07932	Partnership	6/30/99	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nicholas Minoia 26 Columbia Turnpike Florham Park, NJ 07932	Above		5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Real Estate	Aggregate Year-to-Date > \$ 5,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Quail Ridge Associates 26 Columbia Turnpike Florham Park, NJ 07932	Partnership	6/30/99	5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)	Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marc Kushner 26 Columbia Turnpike Florham Park, NJ 07932			5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Student	Aggregate Year-to-Date > \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)

20,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

Contributions: Individuals other than Politicians

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NAME OF COMMITTEE (in full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Q.E.M. Associates 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/30/99 (see contribution below)	Amount of Each Receipt This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Charles Kushner 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Real Estate Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt This Period 5,000.00 (memo)
C. Full Name, Mailing Address and ZIP Code Pheasant Hollow Associates 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/30/99 (see contribution below)	Amount of Each Receipt This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code George Gellert 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Above Occupation Real Estate Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt This Period 5,000.00 (memo)
E. Full Name, Mailing Address and ZIP Code Long Brook Associates 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Partnership Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) 6/30/99 (see contribution below)	Amount of Each Receipt This Period 5,000.00
F. Full Name, Mailing Address and ZIP Code Jared Kushner 26 Columbia Turnpike Florham Park, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Student Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year)	Amount of Each Receipt This Period 5,000.00 (memo)
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

15,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 16 OF 17
FOR LINE NUMBER 11(a)

Contributions: Individuals/Other than Political

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code General Greene Village Asso. 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Partnership	Date (month, day, year) 6/30/99	Amount of Each Receipt This Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)		
B. Full Name, Mailing Address and ZIP Code Esther Schuller 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt This Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REAL ESTATE		
C. Full Name, Mailing Address and ZIP Code Constantine Village Associates 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Partnership	Date (month, day, year) 6/30/99	Amount of Each Receipt This Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)		
D. Full Name, Mailing Address and ZIP Code Linda Laulicht 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt This Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REAL ESTATE		
E. Full Name, Mailing Address and ZIP Code Alton Place Associates 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Partnership	Date (month, day, year) 6/30/99	Amount of Each Receipt This Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation (see attribution below)		
F. Full Name, Mailing Address and ZIP Code Gene Schenkman 26 Columbia Turnpike Florham Park, NJ 07932	Name of Employer Above	Date (month, day, year) (see attribution below)	Amount of Each Receipt This Period 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REAL ESTATE		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
Aggregate Year-to-Date	Aggregate Year-to-Date	Aggregate Year-to-Date	Aggregate Year-to-Date

SUBTOTAL of Receipts This Page (optional)

15,000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **17** OF **17**
FOR LINE NUMBER **11 (a)**

CONTRIBUTIONS: Individuals/other than Political Comm.

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Bruckner Plaza Associates 26 Columbia Turnpike Florham Park, NJ 07932		Name of Employer Partnership	Date (month, day, year) 6/30/99	Amount of Each Receipt This Period \$ 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation (See Attribution below)		
		Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Murray Kushner 26 Columbia Turnpike Florham Park, NJ 07932		Name of Employer Above	Date (month, day, year)	Amount of Each Receipt This Period \$ 5,000.00 (memo)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation Real Estate		
		Aggregate Year-to-Date > \$ 5,000.00		
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation		
		Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

260,100.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER
1165

Contributions: Political Party Committees

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code NJ Democratic State Comm. Victory '98 - Federal Account 150 W. State Street Trenton NJ 08608	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 1/29/99	Amount of Each Receipt this Period 2,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	2,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER

CONTRIBUTIONS: Other Political Committees

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Drive Political Fund 25 Louisiana Avenue Washington DC 20001		Name of Employer	Date (month, day, year) 3/29/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code CWA District 1 Federal PAC 80 Pine Street New York NY 10005		Name of Employer	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period 5,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):		Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 10,000.00

TOTAL This Period (last page this line number only) 10,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER
17

Other Federal Receipts

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code United States Treasury Austin, Texas 78701	Purpose of Disbursement Interest TAX Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 43.10
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

43.10

TOTAL This Period (last page this line number only)

43.10

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 21
FOR LINE NUMBER
21(6)

Other Federal Operating Expenditures

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) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/6/99	33.00
C. Full Name, Mailing Address and ZIP Code Business News 104 Church Street N. Brunswick NJ 08901	Purpose of Disbursement SUBSCRIPTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/6/99	239.85
D. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/7/99	33.00
E. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/7/99	163.45
F. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/8/99	1,098.96
G. Full Name, Mailing Address and ZIP Code Staples 801 Route 1 & Green Street Iselin NJ 08830	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/11/99	93.13
H. Full Name, Mailing Address and ZIP Code Bell Atlantic mobile P.O. Box 15539 Worcester, PA 01615	Purpose of Disbursement CELLULAR: GARY TARTER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/11/99	475.33
I. Full Name, Mailing Address and ZIP Code KVI Township of Woodbridge 1 MAIN STREET Woodbridge, NJ 07095	Purpose of Disbursement HEALTH BENEFITS: GARY TARTER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/11/99	1,263.44

SUBTOTAL of Disbursements This Page (optional)

3,900.16

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Organized Disbursements
Expenditures

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

PAGE **2** OF **21**
FOR LINE NUMBER
21(b)

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) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code 94 Green, LLC 94 Green St. Woodbridge, NJ 07095	Purpose of Disbursement office rent: Jan- March '99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/14/99	Amount of Each Disbursement This Period 900.00
B. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement: mileage/gas Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/14/99	Amount of Each Disbursement This Period 51.00
C. Full Name, Mailing Address and ZIP Code Office Max 877 St. George Avenue Woodbridge NJ 07095	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/14/99	Amount of Each Disbursement This Period 30.93
D. Full Name, Mailing Address and ZIP Code Office Max 877 St. George Avenue Woodbridge NJ 07095	Purpose of Disbursement copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/15/99	Amount of Each Disbursement This Period 21.47
E. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement stamps Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/15/99	Amount of Each Disbursement This Period 231.00
F. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement: Hotel Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/15/99	Amount of Each Disbursement This Period 47.02
G. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/15/99	Amount of Each Disbursement This Period 133.76
H. Full Name, Mailing Address and ZIP Code Target 100 Parsonage Road Edison NJ 08818	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/15/99	Amount of Each Disbursement This Period 78.44
I. Full Name, Mailing Address and ZIP Code Message & Media 65 Church Street New Brunswick NJ 08901	Purpose of Disbursement stationery Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/19/99	Amount of Each Disbursement This Period 726.00

SUBTOTAL of Disbursements This Page (optional)

2,269.62

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenses

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

PAGE **3** OF **21**
FOR LINE NUMBER **21(b)**

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Cinema Sound, Ltd. 311 W. 75 th Street New York NY 10023	Purpose of Disbursement TAPE duplication Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/19/99	Amount of Each Disbursement This Period 180.00
B. Full Name, Mailing Address and ZIP Code AT&T PO Box 8029 S. Hackensack NJ 07606	Purpose of Disbursement monthly long distance Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/19/99	Amount of Each Disbursement This Period 121.27
C. Full Name, Mailing Address and ZIP Code Sheraton At Woodbridge Place 515 Route 1 South Iselin NJ 08830	Purpose of Disbursement Board meeting Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/19/99	Amount of Each Disbursement This Period 941.57
D. Full Name, Mailing Address and ZIP Code Office Max 877 St. George's Avenue Woodbridge NJ 07095	Purpose of Disbursement copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/19/99	Amount of Each Disbursement This Period 402.38
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/20/99	Amount of Each Disbursement This Period 549.48
F. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 10.00
G. Full Name, Mailing Address and ZIP Code Congressional Quarterly, Inc. 1414 22 nd Street N.W. Washington DC 20037	Purpose of Disbursement Federal PAC Directory Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 200.75
H. Full Name, Mailing Address and ZIP Code SHPS - COBRA PO Box 85034 Louisville KY 40285	Purpose of Disbursement Health Benefits: TANYA SMITH Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 291.88
I. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 112.00

SUBTOTAL of Disbursements This Page (optional)

2,809.33

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

PAGE **4** OF **21**
FOR LINE NUMBER **2163**

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) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 643.80
B. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular service: Paul Levinsohn Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 407.51
C. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/25/99	Amount of Each Disbursement This Period 129.63
D. Full Name, Mailing Address and ZIP Code Gerard Balmir 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement: mileage/gas Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/27/99	Amount of Each Disbursement This Period 71.50
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/27/99	Amount of Each Disbursement This Period 549.48
F. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/28/99	Amount of Each Disbursement This Period 163.45
G. Full Name, Mailing Address and ZIP Code IRS -FUTA	Purpose of Disbursement 4th Qtr. Fed. Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/28/99	Amount of Each Disbursement This Period 80.80
H. Full Name, Mailing Address and ZIP Code FIRST UNION BANK moore + berry streets woodbridge, NJ 07095	Purpose of Disbursement 4th Qtr. Fed. Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/28/99	Amount of Each Disbursement This Period 4,153.61
I. Full Name, Mailing Address and ZIP Code State of New Jersey PO Box 248 Trenton NJ 08646	Purpose of Disbursement 4th Qtr. Fed. Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/28/99	Amount of Each Disbursement This Period 1,394.35

SUBTOTAL of Disbursements This Page (optional)

7,594.13

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

PAGE **5** OF **21**
FOR LINE NUMBER **21(6)**

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) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/29/99	Amount of Each Disbursement This Period 1,290.10
B. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/29/99	Amount of Each Disbursement This Period 2,846.30
C. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/29/99	Amount of Each Disbursement This Period 119.58
D. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement: BUSINESS CALLS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/29/99	Amount of Each Disbursement This Period 8.76
E. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement Reimbursement Education mtr Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/2/99	Amount of Each Disbursement This Period 190.11
F. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement Cellular: GARY TACKET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/2/99	Amount of Each Disbursement This Period 1,027.59
G. Full Name, Mailing Address and ZIP Code Woodbridge Metro Chamber of Commerce Main Street Woodbridge, NJ 07095	Purpose of Disbursement Meeting Event Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/2/99	Amount of Each Disbursement This Period 425.00
H. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/3/99	Amount of Each Disbursement This Period 163.45
I. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/3/99	Amount of Each Disbursement This Period 91.80

SUBTOTAL of Disbursements This Page (optional)

6,161.69

TOTAL This Period (last page this line number only)

SCHEDULE D Other Federal Operations
ITEMIZED DISBURSEMENTS
Expenditures

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

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NAME OF COMMITTEE (in full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/3/99	Amount of Each Disbursement This Period 549.48
B. Full Name, Mailing Address and ZIP Code FEDEX PO Box 727 Memphis TN 38194	Purpose of Disbursement mail delivery Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/10/99	Amount of Each Disbursement This Period 17.75
C. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/10/99	Amount of Each Disbursement This Period 549.48
D. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/11/99	Amount of Each Disbursement This Period 163.45
E. Full Name, Mailing Address and ZIP Code Politifax 409 Washington Street #101 Hoboken NJ 07030	Purpose of Disbursement subscription Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/10/99	Amount of Each Disbursement This Period 199.00
F. Full Name, Mailing Address and ZIP Code Message & Media 65 Church Street New Brunswick NJ 08901	Purpose of Disbursement printing expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/10/99	Amount of Each Disbursement This Period 183.38
G. Full Name, Mailing Address and ZIP Code Message & Media 65 Church Street New Brunswick NJ 08901	Purpose of Disbursement stationery Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 791.10
H. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement: Finance Dinner Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 387.80
I. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement: Phone Calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/10/99	Amount of Each Disbursement This Period 294.24

SUBTOTAL of Disbursements This Page (optional)

3,135.68

TOTAL This Period (last page this line number only)

SCHEDULE Other Federal Operating
Expenditures

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement: Phone Calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 434.00
B. Full Name, Mailing Address and ZIP Code Jim McGreevey 323 Gill Lane Iselin NJ 08830	Purpose of Disbursement Reimbursement: Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 160.35
C. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 46.46
D. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 86.78
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/17/99	Amount of Each Disbursement This Period 549.48
F. Full Name, Mailing Address and ZIP Code Adam Pechter 608 Duke Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/17/99	Amount of Each Disbursement This Period 236.22
G. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/18/99	Amount of Each Disbursement This Period 193.14
H. Full Name, Mailing Address and ZIP Code CASH - FIRST UNION BANK Moore & Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/19/99	Amount of Each Disbursement This Period 50.00
I. Full Name, Mailing Address and ZIP Code NJ League of Municipalities 407 W. State Street Trenton NJ 08618	Purpose of Disbursement Municipal Directory Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/23/99	Amount of Each Disbursement This Period 45.00

SUBTOTAL of Disbursements This Page (optional)

1,801.43

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

PAGE **8** OF **21**
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NAME OF COMMITTEE (In Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Staples Credit Plan Box 30292 Salt Lake City UT 84130-0292	Purpose of Disbursement OFFICE Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/24/99	Amount of Each Disbursement This Period 234.05
B. Full Name, Mailing Address and ZIP Code SHPS - COBRA PO Box 85034 Louisville KY 40285	Purpose of Disbursement Health Benefits: TANYA SMITH Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/24/99	Amount of Each Disbursement This Period 291.88
C. Full Name, Mailing Address and ZIP Code AT&T PO Box 8029 S. Hackensack NJ 07606	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/24/99	Amount of Each Disbursement This Period 92.63
D. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: Paul Levinsohn Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/24/99	Amount of Each Disbursement This Period 464.94
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/24/99	Amount of Each Disbursement This Period 549.48
F. Full Name, Mailing Address and ZIP Code Zene Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/25/99	Amount of Each Disbursement This Period 163.45
G. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/1/99	Amount of Each Disbursement This Period 182.03
H. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: Gary Taffet Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/1/99	Amount of Each Disbursement This Period 759.66
I. Full Name, Mailing Address and ZIP Code KVI Township of Woodbridge 1 Main Street Woodbridge, NJ 07095	Purpose of Disbursement HEALTH BENEFITS: GARY TAFFET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/1/99	Amount of Each Disbursement This Period 1,263.44

SUBTOTAL of Disbursements This Page (optional)

3,941.56

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operations
EXPENSES
Expenditures

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

PAGE **9** OF **21**
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NAME OF COMMITTEE (In Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/3/99	Amount of Each Disbursement This Period 549.48
B. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/4/99	Amount of Each Disbursement This Period 163.45
C. Full Name, Mailing Address and ZIP Code James Falstrauch 52 Hillsdale Road Edison NJ 08818	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/5/99	Amount of Each Disbursement This Period 42.39
D. Full Name, Mailing Address and ZIP Code Sheraton at Woodbridge Place 515 Route 1 South Iselin NJ 08830	Purpose of Disbursement meeting event Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/5/99	Amount of Each Disbursement This Period 1,121.25
E. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/9/99	Amount of Each Disbursement This Period 1,287.60
F. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/9/99	Amount of Each Disbursement This Period 643.80
G. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/10/99	Amount of Each Disbursement This Period 549.48
H. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/10/99	Amount of Each Disbursement This Period 163.45
I. Full Name, Mailing Address and ZIP Code Bell Atlantic NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/16/99	Amount of Each Disbursement This Period 10.25

SUBTOTAL of Disbursements This Page (optional)

4,581.15

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	161.06
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FEDEX PO Box 727 Memphis TN 38194	mail delivery Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	15.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples 801 Route 1 & Green Street Iselin NJ 08830	OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/16/99	23.22
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tanya Smith 29 Walter Drive Woodbridge NJ 07095	STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/17/99	549.48
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Post Master General Main Street Woodbridge NJ 07095	STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/99	330.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Zena Anderson 521 Cheryl Drive Iselin NJ 08830	STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/99	163.45
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Cumins 7 Brook Ridge Cedar Grove NJ 07009	photography Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/23/99	550.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tanya Smith 29 Walter Drive Woodbridge NJ 07095	STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/26/99	549.48
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
COMP USA 1130 Route 1 Edison NJ 08818	office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/25/99	42.39

SUBTOTAL of Disbursements This Page (optional)

2,384.58

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/25/99	Amount of Each Disbursement This Period 193.14
B. Full Name, Mailing Address and ZIP Code IRS - FUTA	Purpose of Disbursement 1st Qtr. 99 Fed. Tax Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 271.61
C. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4835 Trenton NJ 08650	Purpose of Disbursement MONTHLY CALLS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 134.78
D. Full Name, Mailing Address and ZIP Code SHPS -COBRA PO Box 85034 Louisville KY 40285	Purpose of Disbursement Health benefits: TANYA SMITH Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 291.88
E. Full Name, Mailing Address and ZIP Code AT&T PO Box 8029 S. Hackensack NJ 07606	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 90.30
F. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: Paul Levinsohn Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 366.79
G. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/29/99	Amount of Each Disbursement This Period 99.00
H. Full Name, Mailing Address and ZIP Code COMP USA 1130 Route 1 Edison NJ 08818	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/30/99	Amount of Each Disbursement This Period 105.99
I. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/1/99	Amount of Each Disbursement This Period 549.48

SUBTOTAL of Disbursements This Page (optional)

2,102.97

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

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NAME OF COMMITTEE (In Full) The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: GARY TARDET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/5/99	Amount of Each Disbursement This Period 919.26
B. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/5/99	Amount of Each Disbursement This Period 99.00
C. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement Reimbursement: Education mtg. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/99	Amount of Each Disbursement This Period 165.17
D. Full Name, Mailing Address and ZIP Code Paul Levinsohn 30 Bradford Drive Old Bridge NJ 08857	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/99	Amount of Each Disbursement This Period 170.00
E. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/8/99	Amount of Each Disbursement This Period 163.45
F. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/8/99	Amount of Each Disbursement This Period 1,098.96
G. Full Name, Mailing Address and ZIP Code State of New Jersey P.O. Box 248 Trenton, NJ 08646	Purpose of Disbursement 1st Qtr. 99 TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/8/99	Amount of Each Disbursement This Period 1,168.24
H. Full Name, Mailing Address and ZIP Code FIRST UNION BANK Moore & Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement 1st Qtr. 99 TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/9/99	Amount of Each Disbursement This Period 127.49
I. Full Name, Mailing Address and ZIP Code FIRST UNION BANK Moore & Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement 1st Qtr. 99 TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/9/99	Amount of Each Disbursement This Period 5,422.31

SUBTOTAL of Disbursements This Page (optional)

9,333.88

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenses

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

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NAME OF COMMITTEE (In Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code NJ Dept. of Labor	Purpose of Disbursement 1 st Qtr. 99 Employer Tax Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/9/99	Amount of Each Disbursement This Period 872.46
B. Full Name, Mailing Address and ZIP Code State of New Jersey P.O. Box 248 Trenton, NJ 08646	Purpose of Disbursement GROSS INCOME TAX Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/9/99	Amount of Each Disbursement This Period 48.35
C. Full Name, Mailing Address and ZIP Code FIRST UNION BANK Moore + Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement Service Charge March Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/12/99	Amount of Each Disbursement This Period 5.00
D. Full Name, Mailing Address and ZIP Code Woodbridge Moving & Storage Raskulinecz Road Carteret NJ 07008	Purpose of Disbursement moving Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/15/99	Amount of Each Disbursement This Period 200.00
E. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4839 Trenton NJ 08650	Purpose of Disbursement Monthly Calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/26/99	Amount of Each Disbursement This Period 7.69
F. Full Name, Mailing Address and ZIP Code CASH FIRST UNION BANK Moore + Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/10/99	Amount of Each Disbursement This Period 300.00
G. Full Name, Mailing Address and ZIP Code Staples 801 Route 1 & Green Street Iselin NJ 08830	Purpose of Disbursement OFFICE Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/12/99	Amount of Each Disbursement This Period 30.48
H. Full Name, Mailing Address and ZIP Code Office Max 877 St. George's Avenue Woodbridge NJ 07095	Purpose of Disbursement OFFICE supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/12/99	Amount of Each Disbursement This Period 102.01
I. Full Name, Mailing Address and ZIP Code FIRST UNION BANK Moore + Berry Streets Woodbridge, NJ 07095	Purpose of Disbursement Service Charge April Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/12/99	Amount of Each Disbursement This Period 16.00

SUBTOTAL of Disbursements This Page (optional)

1,581.99

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

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NAME OF COMMITTEE (In Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Staples 801 Route 1 & Green Street Iselin NJ 08830	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 30.27
B. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 8.70
C. Full Name, Mailing Address and ZIP Code 94 Green, LLC 94 Green Street Woodbridge, NJ 07095	Purpose of Disbursement office rent april '99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 300.00
D. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement reimbursement: office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 1,102.52
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 1,098.96
F. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 193.14
G. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement stamps Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/14/99	Amount of Each Disbursement This Period 87.00
H. Full Name, Mailing Address and ZIP Code Office Max 877 St. George's Avenue Woodbridge NJ 07095	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/17/99	Amount of Each Disbursement This Period 9.29
I. Full Name, Mailing Address and ZIP Code Staples 801 Route 1 & Green Street Iselin NJ 08830	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/19/99	Amount of Each Disbursement This Period 345.55

SUBTOTAL of Disbursements This Page (optional)

3,175.43

TOTAL This Period (last page this line number only)

SCHEDULE B **Other Federal Operating** **ITEMIZED DISBURSEMENTS**
Expenditures

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

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NAME OF COMMITTEE (In Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement 4 AMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/19/99	Amount of Each Disbursement This Period 1,009.70
B. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement mileage/GAS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/19/99	Amount of Each Disbursement This Period 62.00
C. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/20/99	Amount of Each Disbursement This Period 193.14
D. Full Name, Mailing Address and ZIP Code SHPS-COBRA PO Box 85034 Louisville KY 40285	Purpose of Disbursement HEALTH BENEFITS: TANYA SMITH Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/20/99	Amount of Each Disbursement This Period 583.76
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/20/99	Amount of Each Disbursement This Period 549.48
F. Full Name, Mailing Address and ZIP Code Janie Falstrauck 52 Hillside Road Edison NJ 08818	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/24/99	Amount of Each Disbursement This Period 122.00
G. Full Name, Mailing Address and ZIP Code KVI Township of Woodbridge 1 Main Street Woodbridge, NJ 07095	Purpose of Disbursement HEALTH BENEFITS: GARY TAYLOR Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/24/99	Amount of Each Disbursement This Period 1,263.44
H. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/27/99	Amount of Each Disbursement This Period 549.48
I. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/27/99	Amount of Each Disbursement This Period 193.14

SUBTOTAL of Disbursements This Page (optional)

4,526.14

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operations **EXPENSES** **Expenditures**

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Adam Pechter 608 Duke Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/27/99	Amount of Each Disbursement This Period 295.00
B. Full Name, Mailing Address and ZIP Code Staples 801 Route 1 & Green Street Iselin NJ 08830	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/25/99	Amount of Each Disbursement This Period 569.86
C. Full Name, Mailing Address and ZIP Code Floral Expressions, Inc. 87 Main Street Woodbridge NJ 07095	Purpose of Disbursement Get well Flowers Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/25/99	Amount of Each Disbursement This Period 98.70
D. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 740.10
E. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: Paul Levinsohn Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 1,168.92
F. Full Name, Mailing Address and ZIP Code FEDEX PO Box 727 Memphis TN 38194	Purpose of Disbursement MAIL DELIVERY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 505.23
G. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: GARY TARFET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 1,065.58
H. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 1,287.60
I. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement MAILINGS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period 8.05

SUBTOTAL of Disbursements This Page (optional)

5,739.06

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operations
EXPENSES
Expenditures

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

PAGE **17** OF **21**
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21 (a)

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NAME OF COMMITTEE (in full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code STAPLES 501 Rodie's + Green Street Iselin, NJ 08830	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/2/99	Amount of Each Disbursement This Period 1,654.28
B. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/3/99	Amount of Each Disbursement This Period 193.14
C. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/3/99	Amount of Each Disbursement This Period 549.48
D. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/3/99	Amount of Each Disbursement This Period 100.00
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/4/99	Amount of Each Disbursement This Period 200.00
F. Full Name, Mailing Address and ZIP Code Sean Murray Nolan 3 Lincroft Drive Gladstone NJ 07934	Purpose of Disbursement Reimbursement: TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/7/99	Amount of Each Disbursement This Period 986.91
G. Full Name, Mailing Address and ZIP Code Jamia Falstraull 52 Hilldale Road Edison NJ 08818	Purpose of Disbursement Reimbursement: TRAVEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/7/99	Amount of Each Disbursement This Period 130.00
H. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement MAILINGS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/9/99	Amount of Each Disbursement This Period 15.10
I. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/9/99	Amount of Each Disbursement This Period 549.48

SUBTOTAL of Disbursements This Page (optional)

4,378.39

TOTAL This Period (last page this line number only)

SCHEDULE B **ITEMIZED DISBURSEMENTS**
Other Federal Operating
Expenditures

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement: Phone Calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/9/99	Amount of Each Disbursement This Period 7.00
B. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/10/99	Amount of Each Disbursement This Period 193.14
C. Full Name, Mailing Address and ZIP Code Office Max 877 St. George's Avenue Woodbridge NJ 07095	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/11/99	Amount of Each Disbursement This Period 148.36
D. Full Name, Mailing Address and ZIP Code Sheraton At Woodbridge Place 515 Route 1 South Iselin NJ 08830	Purpose of Disbursement meeting/event Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/14/99	Amount of Each Disbursement This Period 1,246.50
E. Full Name, Mailing Address and ZIP Code Staple S 801 Route 1 + Green St. Iselin, NJ 08830	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/15/99	Amount of Each Disbursement This Period 35.13
F. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/17/99	Amount of Each Disbursement This Period 549.48
G. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement staff salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/21/99	Amount of Each Disbursement This Period 193.14
H. Full Name, Mailing Address and ZIP Code AT&T PO Box 8029 S. Hackensack NJ 07606	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 8.51
I. Full Name, Mailing Address and ZIP Code Bell Atlantic Mobile P.O. Box 15559 Worcester, PA 01615	Purpose of Disbursement cellular: GARY TACKET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 816.49

SUBTOTAL of Disbursements This Page (optional)

3,197.75

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement MONTHLY CALLS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 1,586.11
B. Full Name, Mailing Address and ZIP Code Premiere Technologies, Inc 1 Industrial Way Eatontown NJ 07724	Purpose of Disbursement BROADCAST FAX Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 860.95
C. Full Name, Mailing Address and ZIP Code Metro Park Florist 37 Gills Lane Iselin NJ 08830	Purpose of Disbursement THANK YOU FLOWERS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 52.35
D. Full Name, Mailing Address and ZIP Code The Star Ledger PO Box 148 Newark NJ 07102	Purpose of Disbursement MAIL DELIVERY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/99	Amount of Each Disbursement This Period 14.40
E. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07093	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/23/99	Amount of Each Disbursement This Period 2,000.00
F. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/99	Amount of Each Disbursement This Period 193.14
G. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07093	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/99	Amount of Each Disbursement This Period 549.48
H. Full Name, Mailing Address and ZIP Code Zena Anderson 521 Cheryl Drive Iselin NJ 08830	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/24/99	Amount of Each Disbursement This Period 193.14
I. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 643.80

SUBTOTAL of Disbursements This Page (optional)

6,093.37

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Organized DISBURSEMENTS
Expenditures

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

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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code Lucille Davy 920 Harding Street Westfield NJ 07090	Purpose of Disbursement Reimbursement: Education mfg. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 309.56
B. Full Name, Mailing Address and ZIP Code Charmaine Cadette 58 Meadow Road Edison NJ 08817	Purpose of Disbursement Reimbursement: mileage/gas Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 10.50
C. Full Name, Mailing Address and ZIP Code Woodbridge Flower Shoppe 540 Rahway Avenue Woodbridge NJ 07095	Purpose of Disbursement Thank You Flowers Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 50.62
D. Full Name, Mailing Address and ZIP Code Woodbridge Flower Shoppe 540 Rahway Avenue Woodbridge NJ 07095	Purpose of Disbursement Thank You Flowers Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 50.62
E. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 497.39
F. Full Name, Mailing Address and ZIP Code Message & Media 65 Church Street New Brunswick NJ 08901	Purpose of Disbursement stationery Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 918.00
G. Full Name, Mailing Address and ZIP Code Woodbridge Flower Shoppe 540 Rahway Avenue Woodbridge NJ 07095	Purpose of Disbursement Thank You Flowers Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 50.62
H. Full Name, Mailing Address and ZIP Code Bell Atlantic -NJ PO Box 4833 Trenton NJ 08650	Purpose of Disbursement monthly calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 99.51
I. Full Name, Mailing Address and ZIP Code KVI Township of Woodbridge 1 Main Street Woodbridge, NJ 07095	Purpose of Disbursement Health benefits: GARY TAFET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 1,263.44

SUBTOTAL of Disbursements This Page (optional)

3,250.26

TOTAL This Period (last page this line number only)

SCHEDULE B Other Federal Operating Expenditures

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

PAGE **21** OF **21**
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NAME OF COMMITTEE (in Full) **The Committee for Working Families**

A. Full Name, Mailing Address and ZIP Code SHPS - COBRA PO Box 85034 Louisville KY 40285	Purpose of Disbursement HEALTH BENEFITS: TANYA SMITH Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 291.88
B. Full Name, Mailing Address and ZIP Code AT&T PO Box 8029 S. Hackensack NJ 07606	Purpose of Disbursement cellular service: GARY TAFLET Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 728.00
C. Full Name, Mailing Address and ZIP Code Post Master General Main Street Woodbridge NJ 07095	Purpose of Disbursement STAMPS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 66.00
D. Full Name, Mailing Address and ZIP Code Tanya Smith 29 Walter Drive Woodbridge NJ 07095	Purpose of Disbursement Reimbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 58.97
E. Full Name, Mailing Address and ZIP Code TANYA SMITH 29 Walter Drive Woodbridge, NJ 07095	Purpose of Disbursement STAFF SALARY Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/30/99	Amount of Each Disbursement This Period 649.48
F. Full Name, Mailing Address and ZIP Code AT + T P.O. Box 8029 S. HACKENSACK, NJ 07606	Purpose of Disbursement Long Distance calls Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 194.78
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,889.11

TOTAL This Period (last page this line number only)

83,798.18

SCHEDULE B **ITEMIZED DISBURSEMENTS**
Contributions to Federal Candidates/
Committees and other Political Committees

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

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Election Fund of William D. Payne PO 200143, 1 Riverfront Plaza Newark NJ 07102	Purpose of Disbursement Dinner contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/12/99	Amount of Each Disbursement This Period 250.00
B. Full Name, Mailing Address and ZIP Code NJ Democratic State Committee Federal Account Victory 98 Fed 150 W. State Street Trenton NJ 08608	Purpose of Disbursement Political contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/25/99	Amount of Each Disbursement This Period 2,000.00
C. Full Name, Mailing Address and ZIP Code Torrice for Senate 430 S. Capital Street S.E. Washington DC 20003	Purpose of Disbursement Political contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/3/99	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code Turrice for Senate 430 S. Capital Street S.E. Washington DC 20003	Purpose of Disbursement Political contribution Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 3/3/99	Amount of Each Disbursement This Period 2,000.00
E. Full Name, Mailing Address and ZIP Code Meneendez for Congress PO Box 848 Union City NJ 07087	Purpose of Disbursement Political contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/9/99	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Rush Holt for Congress PO Box 782 Pennington NJ 08534	Purpose of Disbursement Political contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/13/99	Amount of Each Disbursement This Period 2,000.00
G. Full Name, Mailing Address and ZIP Code Pallone for Congress 504 Broadway Long Branch NJ 07740	Purpose of Disbursement Political contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/26/99	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Election Fund of Kevin Nolan 41 Warren Street Bloomfield NJ 07003	Purpose of Disbursement Political contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 212.00
I. Full Name, Mailing Address and ZIP Code Senate Democratic Leader Majority 2000 150 W. State Street Trenton NJ 08608	Purpose of Disbursement Dinner contribution Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/28/99	Amount of Each Disbursement This Period 750.00

SUBTOTAL of Disbursements This Page (optional)

14,212.00

TOTAL This Period (last page this line number only)

SCHEDULE B
Contributions to Federal Candidates/
Committees and other Political Committees

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code PAC for a Change 601 S. Figueroa Los Angeles CA 90017	Purpose of Disbursement <i>Political Contribution</i> Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/29/99	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Barbara Boxer 11050 San Monica Blvd Los Angeles CA 90025	Purpose of Disbursement <i>Political Contribution</i> Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/29/99	Amount of Each Disbursement This Period 5,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

10,000.00

TOTAL This Period (last page this line number only)

24,212.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Records of contributions to Individuals/Persons other than Political Committee

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

PAGE **2** OF **2**
FOR LINE NUMBER **28A**

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NAME OF COMMITTEE (in Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code John V. Rawson 1330 Route 206 Skillman NJ 08558	Purpose of Disbursement Refund-over limit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 5,000.00
B. Full Name, Mailing Address and ZIP Code Doctor's Care PC 10 N Wood Avenue Linden NJ 07036	Purpose of Disbursement corp. check Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Darbin Management Corp 10 N Wood Avenue Linden NJ 07036	Purpose of Disbursement corp. check Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 2,000.00
D. Full Name, Mailing Address and ZIP Code Essential Chiropractic Care, PC 2101 Bergenline Avenue Union City NJ 07087	Purpose of Disbursement corp. check Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code Philmar Medical Assoc., PA PO Box 116 Marlton NJ 08053	Purpose of Disbursement corp. check Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7/29/99	Amount of Each Disbursement This Period 2,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

10,500.00

TOTAL This Period (last page this line number only)

10,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

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

PAGE **1** OF **2**
FOR LINE NUMBER
29

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NAME OF COMMITTEE (in Full)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code Tri-State Minority Yellow Pages PO Box 2371 Bala Cynwyd PA 19004	Purpose of Disbursement Ad Listing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/8/99	Amount of Each Disbursement This Period 150.00
B. Full Name, Mailing Address and ZIP Code Foundation for Dance Promotion 120 Lloyd Road Montclair NJ 07042	Purpose of Disbursement Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 1/21/99	Amount of Each Disbursement This Period 200.00
C. Full Name, Mailing Address and ZIP Code Giblin Association 150 W. State Street Trenton NJ 08608	Purpose of Disbursement Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2/17/99	Amount of Each Disbursement This Period 250.00
D. Full Name, Mailing Address and ZIP Code Karen Russo (NJ Pageant) PO Box 434 Elmwood Park NJ 07407	Purpose of Disbursement Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/6/99	Amount of Each Disbursement This Period 50.00
E. Full Name, Mailing Address and ZIP Code Our Lady of Peace School Amboy Avenue Fords NJ 08863	Purpose of Disbursement Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/16/99	Amount of Each Disbursement This Period 50.00
F. Full Name, Mailing Address and ZIP Code AG 013 at the WYNMAN WALKER Clinic 2027 MASSACHUSETTS AVE., N.W. WASHINGTON, D.C. 20036	Purpose of Disbursement Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 3/24/99	Amount of Each Disbursement This Period 250.00
G. Full Name, Mailing Address and ZIP Code Temple Chev Shalom c/o Priscilla Glinn 21 Beechwood Court Colonia NJ 07067	Purpose of Disbursement Retirement Gift for Cantor Rockman Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/99	Amount of Each Disbursement This Period 130.00
H. Full Name, Mailing Address and ZIP Code HRET of New Jersey PO Box 27849 Newark NJ 07101	Purpose of Disbursement Registration for Leadership conf. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/21/99	Amount of Each Disbursement This Period 30.00
I. Full Name, Mailing Address and ZIP Code HRET of New Jersey P.O. Box 27849 NEWARK, NJ 07101	Purpose of Disbursement Registration for Leadership conf. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/21/99	Amount of Each Disbursement This Period 30.00

SUBTOTAL of Disbursements This Page (optional)

1,140.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 2
FOR LINE NUMBER 29

Other Disbursements

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)

The Committee for Working Families

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Catholic Community Services 1160 Raymond Blvd. Newark NJ 07102	Dinner event Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/17/99	1,500.00
B. Full Name, Mailing Address and ZIP Code Joseph Kushner Hebrew Academy 110 S. Orange Avenue Livingston NJ 07039	Ad Listing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/27/99	750.00
C. Full Name, Mailing Address and ZIP Code Aileen M. Starkey 415 Princeton Avenue Bricktown NJ 08724	Charity - Leukemia Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/28/99	25.00
D. Full Name, Mailing Address and ZIP Code Newark Bears 10 Bridge Street Newark NJ 07102	Organization contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/4/99	32.00
E. Full Name, Mailing Address and ZIP Code St. James AME Building Fund 588 Martin Luther King Blvd. Newark NJ 07102	Charity Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/7/99	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

3,307.00

TOTAL This Period (last page this line number only)

4,447.00

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June 17, 1999

Paul Levinsohn, Treasurer
Committee for Working Families
Wilentz, Goldman & Spitzer
90 Woodbridge Center Drive
Suite 900, Box 10
Woodbridge, NJ 07095-0958

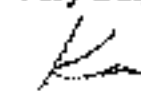
Re: Political Contribution

Dear Mr. Levinsohn:

Please note that the contribution in the amount of \$3,200, made payable to "The Committee for Working Families" is a partnership check. I am enclosing a list of equity partners in the law firm of Montgomery, McCracken, Walker & Rhoads, LLP.

Thank you in advance for your cooperation in this regard.

Very truly yours,


Kenneth M. Jarin

KMJ/dms
Enclosure

Montgomery, McCracken, Walker & Rhoads, L.L.P.
123 S. Broad Street
Philadelphia, PA 19109
(215) 772-1500

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Federal Election Commission

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