

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

Office Use Only

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

NORPAC

ADDRESS (number and street)
▼

PO Box 5595

☐Check if different
than previously
reported. (ACC)

Englewood

NJ

07631

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00247403

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

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

05

01

2006

through

05

31

2006

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

Kevin Lemmer

Signature of Treasurer

Electronically Filed by Kevin Lemmer

Date

06

20

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

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

To:

M	M		D	D		Y	Y	Y	Y
0	5		3	1		2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		382299.00
(b) Cash on Hand at Beginning of Reporting Period	407180.71	
(c) Total Receipts (from Line 19)	50879.54	144460.17
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	458060.25	526759.17
7. Total Disbursements (from Line 31)	41920.12	110619.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	416140.13	416140.13
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
NORPAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 5 0 1 2 0 0 6

To:

M M D D Y Y W Y
0 5 3 1 2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	39032.91	100934.66
(i) Itemized (use Schedule A)	10729.35	39608.35
(ii) Unitemized	49762.26	140543.01
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	49762.26	140543.01
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	130.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1117.28	3787.16
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	50879.54	144460.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50879.54	144460.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	35830.12	79354.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	35830.12	79354.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	30000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	90.00	1265.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	90.00	1265.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41920.12	110619.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41920.12	110619.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	49762.26	140543.01
34. Total Contribution Refunds (from Line 28(d))	90.00	1265.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49672.26	139278.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	35830.12	79354.04
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	130.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35830.12	79224.04

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 517 Churchill Rd

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cadie Products

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15692

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

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

Ruth Arbit

Mailing Address 166 Elm Road

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Refuah Health Center

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15722

Amount of Each Receipt this Period

240.00

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

Barry Badner

Mailing Address 261 Robin Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zehar and Badner

Occupation
Mgmt Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15637

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Alan Berger

Mailing Address 24 Sutton Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15641

Amount of Each Receipt this Period

100.00

check for Kent Conrad

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Marc Berger

Mailing Address 210 W. 89th St.

City State Zip Code
 New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15691

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Gail Billig

Mailing Address 311 Walnut St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15628

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Michael Blumenthal

Mailing Address 139 Huguenot Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15790

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Michael Blumenthal

Mailing Address 139 Huguenot Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15639

Amount of Each Receipt this Period

150.00

check for Kent Conrad

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Judy Braun

Mailing Address 218 Sunset Ave.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15913

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Martin Braun Mailing Address 218 Sunset Ave. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Leo Schachter & Co. Occupation Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Transaction ID: SA11A1.15929 Amount of Each Receipt this Period 1250.00
B. Full Name (Last, First, Middle Initial) Keith Breiman Mailing Address 278 Churchill Rd. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Montclair Pub Sch Occupation Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11A1.15694 Amount of Each Receipt this Period 72.00 check for Steve Rothman [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Ivan Bresgi Mailing Address 400 Warwick Ave City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer NY Presbyterian Occupation Psychologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11A1.15684 Amount of Each Receipt this Period 500.00 check for Steve Rothman [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Laurie Bryk

Mailing Address 234 briarwood crossing

City State Zip Code
 Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15841

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

B. Laurie Bryk

Mailing Address 234 briarwood crossing

City State Zip Code
 Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

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

Transaction ID: SA11A1.15902

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. joel budin

Mailing Address 140 Chestnut St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
hackensack radiology

Occupation
physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15627

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 73

(check only one)

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

NORPAC

Full Name (Last, First, Middle Initial)

A. Andrew Cohen

Mailing Address 76 Troy Dr

City State Zip Code
 Short Hills NJ 07078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rock Properties

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.15723

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Rachel David

Mailing Address 235 Walnut St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15683

Amount of Each Receipt this Period

500.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shmuel Davidovics

Mailing Address 285 Fountain Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
HASC Center

Occupation
Computer Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15907

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Philip Druck
Mailing Address 41 Cape May St.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15843

Amount of Each Receipt this Period

330.00

B. Full Name (Last, First, Middle Initial)
Mitchell Eichen
Mailing Address 164 Van Nostrand Avenue

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Perelson Weiner Inc.

Occupation
C.P.A.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15885

Amount of Each Receipt this Period

90.00

C. Full Name (Last, First, Middle Initial)
Victoria Feder
Mailing Address 105 Hudson St

City State Zip Code
New York NY 10013

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15636

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Victoria Feder

Mailing Address 105 Hudson St

City State Zip Code
 New York NY 10013

FEC ID number of contributing federal political committee.

C

Name of Employer
noneOccupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15690

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jenny Felder

Mailing Address 105 barrett rd

City State Zip Code
 Lawrence NY 11559

FEC ID number of contributing federal political committee.

C

Name of Employer
joseph b felder md pcOccupation
office administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

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

Transaction ID: SA11A1.15805

Amount of Each Receipt this Period

480.00

Full Name (Last, First, Middle Initial)

C. Hershel Feldman

Mailing Address 250 Hutchinson Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
Macabee TradingOccupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15621

Amount of Each Receipt this Period

360.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Daniel Feuer			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6	
Mailing Address 335 Robin Road			Transaction ID: SA11A1.15917	
City Englewood		State NJ	Zip Code 07631	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 90.00	
Name of Employer Self		Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00		
B. Full Name (Last, First, Middle Initial) Adina Finkelstein			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 14 Walker Avenue			Transaction ID: SA11A1.15891	
City Closter		State NJ	Zip Code 07624	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 240.00	
Name of Employer		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		
C. Full Name (Last, First, Middle Initial) David Flamholz			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	
Mailing Address 300 Sunset Ave.			Transaction ID: SA11A1.15904	
City Englewood		State NJ	Zip Code 07631	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 90.00	
Name of Employer Abeles & Heymann		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 715.00		

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15620

Amount of Each Receipt this Period

500.00

credit card for Kent Contr-
ad

[MEMO ITEM]

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

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15677

Amount of Each Receipt this Period

1000.00

credit card for Steve Rot-
hman

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Eva Gans
Mailing Address 1044 East Lawn Ct

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15642

Amount of Each Receipt this Period

50.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Toby Glick

Mailing Address 266 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15693

Amount of Each Receipt this Period

180.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mel Gluck

Mailing Address 251 Alison Ct.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.15918

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Shari Gluckstadt

Mailing Address 334 Robin Rd

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Corporate Environments

Occupation

Commercial Furniture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15752

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

490.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 686 Downing St.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tyco International

Occupation
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.15823

Amount of Each Receipt this Period

240.00

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

Mailing Address 250 Mountain Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11A1.15753

Amount of Each Receipt this Period

90.00

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

Mailing Address 250 Mountain Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

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

Transaction ID: SA11A1.15889

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Anne Gontownik

Mailing Address 250 Mountain Rd.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

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

Transaction ID: SA11A1.15908

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. Laurie Gordon

Mailing Address 308 W 104 St

City State Zip Code
 New York NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mt. Sinai Hospital

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15847

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. Robert M. Gottesman

Mailing Address 285 Sunset Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15626

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 19 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Betty Greenspan Mailing Address 20 briarwood lane City State Zip Code Lawrence NY 11559 FEC ID number of contributing federal political committee. C Name of Employer Dr. Young Occupation Dentist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>240.00</div>			Date of Receipt <div>05 / 10 / 2006</div> Transaction ID: SA11A1.15869 Amount of Each Receipt this Period <div>240.00</div>
B. Full Name (Last, First, Middle Initial) Saleh Hassid Mailing Address 39 Allison Dr. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Carpet Importer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>300.00</div>			Date of Receipt <div>05 / 10 / 2006</div> Transaction ID: SA11A1.15871 Amount of Each Receipt this Period <div>150.00</div>
C. Full Name (Last, First, Middle Initial) Esther Hershenbaum Mailing Address 245 Hutchinson Rd. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Cliffside Medical Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>.00</div>			Date of Receipt <div>05 / 31 / 2006</div> Transaction ID: SA11A1.15618 Amount of Each Receipt this Period <div>1000.00</div> credit card for Kent Contr- ad [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Fran Hirmes Mailing Address 25 Wood Lane City Woodsburgh State NY Zip Code 11598 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 6 Transaction ID: SA11A1.15754 Amount of Each Receipt this Period 240.00
B. Full Name (Last, First, Middle Initial) Steven Huberman Mailing Address 1293 Mercedes St City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 6 Transaction ID: SA11A1.15696 Amount of Each Receipt this Period 25.00 check for Steve Rothman [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Beatrice Huppert Mailing Address 51 Dana Pl City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Eye Consultants Occupation Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Transaction ID: SA11A1.15763 Amount of Each Receipt this Period 240.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 161 Van Nostrand Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
Main Event CaterersOccupation
Caterer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15801

Amount of Each Receipt this Period

90.00

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

Mailing Address 118 Dana Pl

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing federal political committee.

C

Name of Employer
SelfOccupation
Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.15824

Amount of Each Receipt this Period

90.00

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

Mailing Address 11 Lyncroft Rd

City State Zip Code
New Rochelle NY 10804

FEC ID number of contributing federal political committee.

C

Name of Employer
Columbia UOccupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15681

Amount of Each Receipt this Period

500.00

check for Steve Rothman

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jonathan Joels

Mailing Address 191 S. Woodland St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bookwell Mgmt.

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 8 / 2 0 0 6

Transaction ID: SA11A1.15825

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

B. Zvi Kahane

Mailing Address 567 Ogden Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15765

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

C. Esti Kaminetsky

Mailing Address 786 Downing St

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15766

Amount of Each Receipt this Period

340.00

SUBTOTAL of Receipts This Page (optional)

910.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 23 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jonathan Kolatch

Mailing Address 115 Dwight Pl.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

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

Transaction ID: SA11A1.15809

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

B. Mindy Kolatch

Mailing Address 115 Dwight Pl

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ramaz

Occupation
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.00

Date of Receipt

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

Transaction ID: SA11A1.15810

Amount of Each Receipt this Period

3750.00

Full Name (Last, First, Middle Initial)

C. Scott Korman

Mailing Address 175 Elm road

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Best Manufacturing

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15638

Amount of Each Receipt this Period

180.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Leon Kozak Mailing Address 280 Jones Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2006 Transaction ID: SA11A1.15736 Amount of Each Receipt this Period 4875.00
B. Full Name (Last, First, Middle Initial) Leon Kozak Mailing Address 280 Jones Rd. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 05 / 22 / 2006 Transaction ID: SA11A1.15617 Amount of Each Receipt this Period 1000.00 check for Kent Conrad [MEMO ITEM]
C. Full Name (Last, First, Middle Initial) Roslyn Kozak Mailing Address 280 Jones Rd. City Englewood State NJ Zip Code 07632 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		Date of Receipt MM / DD / YYYY 05 / 01 / 2006 Transaction ID: SA11A1.15737 Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional)

9875.00

TOTAL This Period (last page this line number only)

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

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

NORPAC

A. Full Name (Last, First, Middle Initial)
Emanuel Landau
Mailing Address 1279 Pennington Road

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYC Board of Education

Occupation
School Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15646

Amount of Each Receipt this Period

18.00

check for Kent Conrad

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Emanuel Landau
Mailing Address 1279 Pennington Road

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYC Board of Education

Occupation
School Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15698

Amount of Each Receipt this Period

18.00

check for Steve Rothman

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Allan Leicht
Mailing Address 3656 Johnson Ave

City State Zip Code
Bronx NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
NYC Housing Authority

Occupation
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15770

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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

NORPAC

A. Full Name (Last, First, Middle Initial) Esther Lerer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 6
Mailing Address 270 Mountain Rd		Transaction ID: SA11A1.15849
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 290.00	

B. Full Name (Last, First, Middle Initial) Esther Lerer		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 270 Mountain Rd		Transaction ID: SA11A1.15919
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 380.00	

C. Full Name (Last, First, Middle Initial) Ria Levart		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 293 merrison street		Transaction ID: SA11A1.15771
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 330.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)

510.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Saul Levine Mailing Address 604 Rutland Ave. City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Occupation Horizon Project Advisors Construction Consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Transaction ID: SA11A1.15773 Amount of Each Receipt this Period 240.00
B. Full Name (Last, First, Middle Initial) Eliane Levy Mailing Address 27 Prospect Rd City State Zip Code Livingston NJ 07039 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 375.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 Transaction ID: SA11A1.15851 Amount of Each Receipt this Period 150.00
C. Full Name (Last, First, Middle Initial) Bennett Lindenbaum Mailing Address 2373 Broadway #1706 City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. C Name of Employer Occupation Basswood Partners, LLC hedge fund manager Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ .00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Transaction ID: SA11A1.15634 Amount of Each Receipt this Period 200.00 check for Kent Conrad [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Bennett Lindenbaum
Mailing Address 2373 Broadway #1706

City State Zip Code
New York NY 10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Basswood Partners, LLC

Occupation
hedge fund manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15688

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Matthew Lindenbaum
Mailing Address 131 E 92 St

City State Zip Code
New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Basswood partners LLC

Occupation
hedge fund manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15635

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Matthew Lindenbaum
Mailing Address 131 E 92 St

City State Zip Code
New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Basswood partners LLC

Occupation
hedge fund manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15689

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Nathan J. Lindenbaum
Mailing Address 464 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
MGS Corp.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15633

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Nathan J. Lindenbaum
Mailing Address 464 Winthrop Rd.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
MGS Corp.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15687

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Roz Lipsky
Mailing Address 28 Lakeview Dr

City State Zip Code
West Orange NJ 07052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Pharmaceutical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

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

Transaction ID: SA11A1.15573

Amount of Each Receipt this Period

92.00

In-kind - breakfast for
West Orange bus

SUBTOTAL of Receipts This Page (optional)

92.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Roz Lipsky Mailing Address 28 Lakeview Dr City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Pharmaceutical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 792.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6 Transaction ID: SA11A1.15931 Amount of Each Receipt this Period 500.00
B. Full Name (Last, First, Middle Initial) Noel Meltzer Mailing Address 26 Blackburne Ter City State Zip Code West Orange NJ 07052 FEC ID number of contributing federal political committee. C Name of Employer Astra Zeneca Occupation Medical Affairs, PhD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Transaction ID: SA11A1.15930 Amount of Each Receipt this Period 240.00
C. Full Name (Last, First, Middle Initial) Sharon Merkin Mailing Address 146 maple street City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6 Transaction ID: SA11A1.15756 Amount of Each Receipt this Period 240.00

SUBTOTAL of Receipts This Page (optional)

980.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Richard Michaelson
Mailing Address 11-18 Fairhaven Pl

City State Zip Code
Fairlawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Life Sciences Research

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15679

Amount of Each Receipt this Period

500.00

check for Steve Rothman

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Howard Miller
Mailing Address 158 Grand Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paine Webber

Occupation
Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.15874

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
Robert Miller
Mailing Address 140 Meadowbrook Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
PR consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15815

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. John Nanasi

Mailing Address 265 Mountain Rd.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Jewelry manufacturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15625

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Nina Nanasi

Mailing Address 265 Mountain Road

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15774

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

C. Drew Parker

Mailing Address 159 Maple St.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kingsbrook Investments

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15623

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey parker

Mailing Address 269 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parker Lamm

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15624

Amount of Each Receipt this Period

250.00

check for Kent Conrad

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Michael Parker

Mailing Address 260 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shelby Inv.

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15905

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. Michael Parker

Mailing Address 260 Maple St.

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shelby Inv.

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15632

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Kenneth Prager
Mailing Address 231 S. Dwight Pl.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Colombia University

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15631

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
David Quint
Mailing Address 4515 Greystone

City State Zip Code
Fieldstone NY 10471

FEC ID number of contributing
federal political committee.

C

Name of Employer
D.E. Shaw and Co.

Occupation
Equity Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.15795

Amount of Each Receipt this Period

330.00

C. Full Name (Last, First, Middle Initial)
David Quint
Mailing Address 4515 Greystone

City State Zip Code
Fieldstone NY 10471

FEC ID number of contributing
federal political committee.

C

Name of Employer
D.E. Shaw and Co.

Occupation
Equity Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2830.00

Date of Receipt

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

Transaction ID: SA11A1.15877

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2830.00

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 83 E. Linden Ave.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
JPMorgan

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15630

Amount of Each Receipt this Period

200.00

check for Kent Conrad

[MEMO ITEM]

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

Jeffrey Rosen

Mailing Address 119 Edgemont Place

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kalikow Bros

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15779

Amount of Each Receipt this Period

240.00

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

Avi Samuels

Mailing Address 185 Elm St.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Diamond Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15936

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 36 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

David Schlusell

Mailing Address 860 Prince St.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Key Properties

Occupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15675

Amount of Each Receipt this Period

1800.00

check for Steve Rothman

[MEMO ITEM]

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

Michael Schulder

Mailing Address 155 W. 68th st. Apt 2015

City State Zip Code
 New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer
NJ Med School

Occupation
Neurosurgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15783

Amount of Each Receipt this Period

1300.00

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

Myron Schulman

Mailing Address 340 Warwick Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.15862

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

1540.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 37 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Myron Schulman
Mailing Address 340 Warwick Ave.

City State Zip Code
Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15678

Amount of Each Receipt this Period

500.00

check for Steve Rothman

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Joseph Schwartz
Mailing Address 117 Maple Ct.

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paine Webber

Occupation
Investment advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15744

Amount of Each Receipt this Period

90.00

C. Full Name (Last, First, Middle Initial)
Elliot Shulman
Mailing Address 105 Dana Place

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15645

Amount of Each Receipt this Period

25.00

check for Kent Conrad

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Eric Sichel		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 411 Highview Road		Transaction ID: SA11A1.15886
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Self	Occupation Investment Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B. Full Name (Last, First, Middle Initial) Kenneth Simckes		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 6
Mailing Address 2 Tauber Ter		Transaction ID: SA11A1.15784
City Monsey	State NY	Zip Code 10952
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer Self	Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C. Full Name (Last, First, Middle Initial) Kenneth Simckes		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 6
Mailing Address 2 Tauber Ter		Transaction ID: SA11A1.15818
City Monsey	State NY	Zip Code 10952
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Self	Occupation Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 39 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

Mailing Address 2 Tauber Ter

City State Zip Code
Monsey NY 10952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.15928

Amount of Each Receipt this Period

1000.00

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

Judy Spiegel

Mailing Address 281 E Linden Ave

City State Zip Code
Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 6

Transaction ID: SA11A1.15786

Amount of Each Receipt this Period

240.00

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

Karen Stahl-Don

Mailing Address 2600 Netherland Ave.
Apt.815

City State Zip Code
Bronx NY 10463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15742

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional)

1330.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 40 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Abe Steinberger

Mailing Address 309 Engle

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15676

Amount of Each Receipt this Period

1000.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Ronnie Stern

Mailing Address 514 Maitland Ave.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wythe Upholstery Co.

Occupation
Furniture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11A1.15906

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

C. Trudy Stern

Mailing Address 480 ocean ave

City State Zip Code
 Lawrence NY 11559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.15798

Amount of Each Receipt this Period

330.00

SUBTOTAL of Receipts This Page (optional)

570.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Ellen Stone Mailing Address 720 Cottage Pl City State Zip Code Teaneck NJ 07666 FEC ID number of contributing federal political committee. C Name of Employer Berger & Co. PA Occupation Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 Transaction ID: SA11A1.15865 Amount of Each Receipt this Period 240.00
B. Full Name (Last, First, Middle Initial) Ronald Strobel Mailing Address 226 Chestnut St. City State Zip Code Englewood NJ 07631 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 6 Transaction ID: SA11A1.15927 Amount of Each Receipt this Period 180.00
C. Full Name (Last, First, Middle Initial) Abigail Tambor Mailing Address 115 86 St City State Zip Code New York NY 11028 FEC ID number of contributing federal political committee. C Name of Employer none Occupation homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Transaction ID: SA11A1.15629 Amount of Each Receipt this Period 200.00 check for Kent Conrad [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 42 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Abigail Tambor

Mailing Address 115 86 St

City State Zip Code
 New York NY 11028

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15686

Amount of Each Receipt this Period

200.00

check for Steve Rothman

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Rudolf Treitel

Mailing Address 333 Broad Avenue

City State Zip Code
 Englewood NJ 07631

FEC ID number of contributing
federal political committee.

C

Name of Employer
N. Treitel & Co.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

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

Transaction ID: SA11A1.15622

Amount of Each Receipt this Period

300.00

check for Kent Conrad

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. moshe vazel

Mailing Address 19 Lizensk Blvd Unit 112

City State Zip Code
 Monroe NY 10950

FEC ID number of contributing
federal political committee.

C

Name of Employer
executive

Occupation
rosewood developers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.15695

Amount of Each Receipt this Period

50.00

check for Steve Rothman

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 43 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

Full Name (Last, First, Middle Initial)

A. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3207.52

Date of Receipt

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

Transaction ID: SA11A1.15565

Amount of Each Receipt this Period

44.52

In-kind - printing

Full Name (Last, First, Middle Initial)

B. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3296.56

Date of Receipt

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

Transaction ID: SA11A1.15567

Amount of Each Receipt this Period

89.04

In-kind - printing

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code
 Edison NJ 08820

FEC ID number of contributing
federal political committee.

C

Name of Employer
James St. Anesthesia

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11A1.15569

Amount of Each Receipt this Period

1703.44

In-kind - printing

SUBTOTAL of Receipts This Page (optional)

1837.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Karen Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 6
Mailing Address 11 Anthony Ave.		Transaction ID: SA11A1.15571
City Edison	State NJ	Zip Code 08820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1368.91
Name of Employer none	Occupation homemaker	In-kind - printing
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3868.91	

B. Full Name (Last, First, Middle Initial) Karen Weinstein		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 11 Anthony Ave.		Transaction ID: SA11A1.15616
City Edison	State NJ	Zip Code 08820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer none	Occupation homemaker	check for Kent Conrad [MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

C. Full Name (Last, First, Middle Initial) Phyllis Weiss		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 6
Mailing Address 258 E. Linden Ave.		Transaction ID: SA11A1.15743
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer AT&T	Occupation Research & Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)

1608.91

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 45 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

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

David Zaslowsky

Mailing Address 31 White Drive

City	State	Zip Code
Cedarhurst	NY	11516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baker & McKenzieOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	6

Transaction ID: SA11A1.15837

Amount of Each Receipt this Period

240.00

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

Edward Zizmor

Mailing Address 1255 Mercedes St

City	State	Zip Code
Teaneck	NJ	07666

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	0	6

Transaction ID: SA11A1.15946

Amount of Each Receipt this Period

500.00

check for Steve Rothman

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

39032.91

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

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

FOR LINE NUMBER: PAGE 46 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2687.24		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Transaction ID: SA17.15578 Amount of Each Receipt this Period 17.36 credit card interest income
B. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3531.75		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Transaction ID: SA17.15579 Amount of Each Receipt this Period 844.51 sweep account interest income
C. Full Name (Last, First, Middle Initial) Valley National Bank Mailing Address 1445 Valley Rd City State Zip Code Wayne NJ 07470 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3625.56		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Transaction ID: SA17.15613 Amount of Each Receipt this Period 93.81 interest - cd 80043691

SUBTOTAL of Receipts This Page (optional)

955.68

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 73

(check only one)

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

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NAME OF COMMITTEE (In Full)

NORPAC

A. Full Name (Last, First, Middle Initial)
Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3787.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: SA17.15614

Amount of Each Receipt this Period

161.60

interest - cd 72432675

SUBTOTAL of Receipts This Page (optional)

161.60

TOTAL This Period (last page this line number only)

1117.28

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. ADP Benefit Services

Mailing Address 4900 University Ave - MS14

City State Zip Code
West Des Moines IA 50266

Purpose of Disbursement
health insur - Joel Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15587

Date of Disbursement

/ /

Amount of Each Disbursement this Period

343.27

Full Name (Last, First, Middle Initial)

B. Barbara Bortniker

Mailing Address 4 Kinzel Lane

City State Zip Code
West Orange NJ 07052

Purpose of Disbursement
Reimburse bus tip/breakfast for DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15601

Date of Disbursement

/ /

Amount of Each Disbursement this Period

211.20

Full Name (Last, First, Middle Initial)

C. Joel Davidson

Mailing Address 25 Ellen Drive

City State Zip Code
Rockaway NJ 07866

Purpose of Disbursement
reimburse travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15584

Date of Disbursement

/ /

Amount of Each Disbursement this Period

128.07

SUBTOTAL of Disbursements This Page (optional)

682.54

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Joel Davidson		Transaction ID: SB21B.15585 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 9 / 2 0 0 6</div> </div>
Mailing Address 25 Ellen Drive		Amount of Each Disbursement this Period <div>12.95</div>
City Rockaway State NJ Zip Code 07866		
Purpose of Disbursement reimburse admin Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Joel Davidson		Transaction ID: SB21B.15586 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 9 / 2 0 0 6</div> </div>
Mailing Address 25 Ellen Drive		Amount of Each Disbursement this Period <div>60.00</div>
City Rockaway State NJ Zip Code 07866		
Purpose of Disbursement reimburse supplies Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Charles Gross		Transaction ID: SB21B.15590 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 1 / 2 0 0 6</div> </div>
Mailing Address 145 W 96 St		Amount of Each Disbursement this Period <div>350.00</div>
City New York State NY Zip Code 10025		
Purpose of Disbursement DC trip training video Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

422.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address

City Ogden State UT Zip Code 84201

Purpose of Disbursement
Tax Year 2005 Amended

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15594

Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

37.80

Full Name (Last, First, Middle Initial)

B. Jewish Voice

Mailing Address Dana Place

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
advertisement for DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15580

Date of Disbursement

05 / 01 / 2006

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

C. Jewish Voice

Mailing Address Dana Place

City Englewood State NJ Zip Code 07631

Purpose of Disbursement
invoice advertisement for DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15610

Date of Disbursement

05 / 26 / 2006

Amount of Each Disbursement this Period

240.00

SUBTOTAL of Disbursements This Page (optional)

517.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jewish World Full Name (Last, First, Middle Initial) Mailing Address 3 Vatrano Road City Albany State NY Zip Code 12205 Purpose of Disbursement advertisement for DC trip Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.15597 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 975.00
B. William Katz Full Name (Last, First, Middle Initial) Mailing Address 535 Barnard Ave City Woodmere State NY Zip Code 11598 Purpose of Disbursement reimburse bus tip/breakfast for DC trip Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.15604 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 203.20
C. NJ Jewish Media Group Full Name (Last, First, Middle Initial) Mailing Address 1086 Teaneck Rd. City Teaneck State NJ Zip Code 07666 Purpose of Disbursement advertisement for DC trip Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB21B.15588 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 6 Amount of Each Disbursement this Period 438.75

SUBTOTAL of Disbursements This Page (optional)

1616.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Joel Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15582

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2006

Amount of Each Disbursement this Period

1720.02

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15583

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2006

Amount of Each Disbursement this Period

588.06

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
invoice

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15589

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2006

Amount of Each Disbursement this Period

139.34

SUBTOTAL of Disbursements This Page (optional)

2447.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
payroll - Joel Davidson

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15595

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1132.01

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15596

Date of Disbursement

/ /

Amount of Each Disbursement this Period

446.90

Full Name (Last, First, Middle Initial)

C. paypal

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement
service fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.15575

Date of Disbursement

/ /

Amount of Each Disbursement this Period

514.88

SUBTOTAL of Disbursements This Page (optional)

2093.79

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Shalom Kosher Market		Transaction ID: SB21B.15609 Date of Disbursement <div> <div>MM / DD / YY</div> <div>05 / 26 / 2006</div> </div>
Mailing Address 2307 University Blvd.		Amount of Each Disbursement this Period <div>12373.75</div>
City Wheaton State MD Zip Code 20902		
Purpose of Disbursement DC trip lunches and dinners		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Valley National Bank		Transaction ID: SB21B.15576 Date of Disbursement <div> <div>MM / DD / YY</div> <div>05 / 31 / 2006</div> </div>
Mailing Address 1445 Valley Rd		Amount of Each Disbursement this Period <div>116.71</div>
City Wayne State NJ Zip Code 07470		
Purpose of Disbursement credit card processing fee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Verizon wireless		Transaction ID: SB21B.15581 Date of Disbursement <div> <div>MM / DD / YY</div> <div>05 / 01 / 2006</div> </div>
Mailing Address PO Box 17120		Amount of Each Disbursement this Period <div>73.56</div>
City Tucson State AZ Zip Code 85731		
Purpose of Disbursement phone service		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

12564.02

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
phone service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15611

Date of Disbursement

05 / 26 / 2006

Amount of Each Disbursement this Period

186.08

Full Name (Last, First, Middle Initial)

B. Washington Court Hotel

Mailing Address 525 New Jersey Ave, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Room rental for DC trip

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15593

Date of Disbursement

05 / 12 / 2006

Amount of Each Disbursement this Period

11522.36

Full Name (Last, First, Middle Initial)

C. Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

Purpose of Disbursement
In-kind - printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.15566

Date of Disbursement

05 / 06 / 2006

Amount of Each Disbursement this Period

44.52

SUBTOTAL of Disbursements This Page (optional)

11752.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Transaction ID: SB21B.15568 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 6 / 2 0 0 6</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>89.04</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind - printing Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Jeffrey Weinstein		Transaction ID: SB21B.15570 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 7 / 2 0 0 6</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>1703.44</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind - printing Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Karen Weinstein		Transaction ID: SB21B.15572 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 7 / 2 0 0 6</div> </div>	
Mailing Address 11 Anthony Ave.		Amount of Each Disbursement this Period <div>1368.91</div>	
City Edison State NJ Zip Code 08820	Purpose of Disbursement In-kind - printing Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>3161.39</div>	
TOTAL This Period (last page this line number only)		<div>35259.82</div>	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Karen Weinstein Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15647 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Leon Kozak Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15648 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement credit card from Mort Fridman Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15650 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 500.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Hershel Feldman Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15651 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 360.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Rudolf Treitel Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15653 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 300.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Drew Parker Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15654 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Jeffrey Parker Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15655 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from John Nanasi Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15656 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Robert Gottesman Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15657 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Joel Budin Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15658 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Gail Billig Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15659 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 250.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Abigail Tambor Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15660 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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

A. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15661 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>200.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from David Rabinowitz Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
B. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15662 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>200.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from Kenneth Prager Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
C. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15663 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>200.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from Michael Parker Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>	
TOTAL This Period (last page this line number only)		<div></div>	

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

Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Nathan J. Lindenbaum Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15664 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Bennett Lindenbaum Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15665 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Matthew Lindenbaum Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15666 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15667 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>200.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from Victoria Feder Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
B. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15668 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>200.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from Barry Badner Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
C. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15669 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>180.00</div>	
City BISMARCK State ND Zip Code 58502	Purpose of Disbursement check from Scott Korman Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>011</div> Category/ Type
		[MEMO ITEM]	
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>	
TOTAL This Period (last page this line number only)		<div></div>	

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15670 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>150.00</div> [MEMO ITEM]	
City BISMARCK	State ND		Zip Code 58502
Purpose of Disbursement check from Michael Blumenthal			<div>011</div> Category/ Type
Candidate Name KENT CONRAD			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15671 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>100.00</div> [MEMO ITEM]	
City BISMARCK	State ND		Zip Code 58502
Purpose of Disbursement check from Alan Berger			<div>011</div> Category/ Type
Candidate Name KENT CONRAD			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) KENT CONRAD		Transaction ID: SB23.15672 Date of Disbursement <div> <div>05</div> <div>22</div> <div>2006</div> </div>	
Mailing Address PO BOX 812		Amount of Each Disbursement this Period <div>50.00</div> [MEMO ITEM]	
City BISMARCK	State ND		Zip Code 58502
Purpose of Disbursement check from Eva Gans			<div>011</div> Category/ Type
Candidate Name KENT CONRAD			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>0.00</div>	
TOTAL This Period (last page this line number only)			

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Elliot Shulman Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15673 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
B. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from Emanuel Landau Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15674 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6 Amount of Each Disbursement this Period 18.00 [MEMO ITEM]
C. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement check from NORPAC Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15598 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Amount of Each Disbursement this Period 5000.00
SUBTOTAL of Disbursements This Page (optional)		5000.00
TOTAL This Period (last page this line number only)		

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

A. KENT CONRAD Full Name (Last, First, Middle Initial) Mailing Address PO BOX 812 City BISMARCK State ND Zip Code 58502 Purpose of Disbursement credit card from Esther Hershenbaum Candidate Name KENT CONRAD Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15649 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00 [MEMO ITEM]
B. PALLONE FOR CONGRESS Full Name (Last, First, Middle Initial) Mailing Address PO BOX 3176 City LONG BRANCH State NJ Zip Code 07740 Purpose of Disbursement check from NORPAC Candidate Name FRANK JR PALLONE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15592 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6 Amount of Each Disbursement this Period 1000.00
C. STEVEN R ROTHMAN Full Name (Last, First, Middle Initial) Mailing Address 18 MALTESE DRIVE City FAIR LAWN State NJ Zip Code 07410 Purpose of Disbursement check from Bennett Lindenbaum Candidate Name STEVEN R ROTHMAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 09 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB23.15711 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6 Amount of Each Disbursement this Period 200.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from David Schlusel

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15701

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1800.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Abe Steinberger

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15702

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
credit card from Mort Fridman

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15703

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Myron Schulman

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15704

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Richard Michaelson

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15705

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Jonathan Javitch

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15706

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Rachel David

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15707

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Ivan Bresgi

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15708

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Abigail Tambor

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15709

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Nathan J. Lindenbaum

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15710

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Matthew Lindenbaum

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15712

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Victoria Feder

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15713

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Marc Berger

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15714

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Robert Applebaum

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15715

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Toby Glick

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15716

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

180.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Keith Breiman

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15717

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

72.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Moshe Vize

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15718

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Steven Huberman

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15719

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Emanuel Landau

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15720

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEVEN R ROTHMAN

Mailing Address 18 MALTESE DRIVE

City FAIR LAWN State NJ Zip Code 07410

Purpose of Disbursement
check from Edward Zizmor

Candidate Name
STEVEN R ROTHMAN

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 09

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.15947

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

6000.00