

# 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 ZIPCODE

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:
- |                                                 |                                      |                                       |                                                                |
|-------------------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3)            | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |                                           |                                        |                                       |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post -Election** Report for the:
- |                                        |                                       |                                        |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 03 01 2011 through 03 31 2011

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 Karen Pichkhadze

Signature of Treasurer Electronically Filed by Karen Pichkhadze Date 05 03 2011

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications such as ads are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		397275.38
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	450844.36									
(c) Total Receipts (from Line 19) .....	96239.22	217398.85								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	547083.58	614674.23								
7. Total Disbursements (from Line 31) .....	137186.93	204777.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	409896.65	409896.65								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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		
(i) Itemized (use Schedule A) .....	81509.00	156614.00
(ii) Unitemized .....	14375.00	55061.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	95884.00	211675.00
(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) .....	95884.00	211675.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	355.22	723.85
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)) .....	96239.22	217398.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	96239.22	217398.85

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	88867.93	139488.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	88867.93	139488.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	46259.00	61789.00
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 .....	2060.00	2300.00
(b) Political Party Committees	0.00	1200.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	2060.00	3500.00
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))..	137186.93	204777.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	137186.93	204777.58

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) .....	95884.00	211675.00
34. Total Contribution Refunds (from Line 28(d)) .....	2060.00	3500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93824.00	208175.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	88867.93	139488.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	88867.93	139488.58

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

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

FOR LINE NUMBER: PAGE 7 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 77 Lee Place

City Bergenfield State NJ Zip Code 07621

FEC ID number of contributing federal political committee. C

Name of Employer Pfizer Occupation Business Tech

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29585

Amount of Each Receipt this Period 225.00  
mission registration fee

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

Mailing Address 77 Lee Place

City Bergenfield State NJ Zip Code 07621

FEC ID number of contributing federal political committee. C

Name of Employer Pfizer Occupation Business Tech

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29588

Amount of Each Receipt this Period 175.00  
mission registration fee

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

Mailing Address 77 Lee Place

City Bergenfield State NJ Zip Code 07621

FEC ID number of contributing federal political committee. C

Name of Employer Pfizer Occupation Business Tech

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29590

Amount of Each Receipt this Period 175.00  
mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... 575.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 455 Mistletoe way

City State Zip Code  
lawrence NY 11598

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
himax investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 03 / 05 / 2011  
**Transaction ID:** SA11AI.29440

Amount of Each Receipt this Period 425.00  
mission registration fee

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

Mailing Address 769 Eleventh Ave.

City State Zip Code  
Paterson NJ 07514

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Fair Lawn Bd. of Ed. Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29594

Amount of Each Receipt this Period 400.00  
mission registration fee

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

Mailing Address 293 E. Linden Ave.

City State Zip Code  
Englewood NJ 07631

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
St Barnabas Med Ctr Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 20 / 2011  
**Transaction ID:** SA11AI.29535

Amount of Each Receipt this Period 525.00  
mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... 1350.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Gabiella Bareket	Date of Receipt MM / DD / YYYY 03 / 20 / 2011
	Mailing Address 317 E Linden Ave	<b>Transaction ID:</b> SA11AI.29512
	City Englewood State NJ Zip Code 07631	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission registration fee
	Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Howard Baruch	Date of Receipt MM / DD / YYYY 03 / 21 / 2011
	Mailing Address 130 Dwight Pl.	<b>Transaction ID:</b> SA11AI.29334
	City Englewood State NJ Zip Code 07631	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. <b>C</b>	earmark-nelson
	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 ▼ 1875.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Howard Baruch	Date of Receipt MM / DD / YYYY 03 / 28 / 2011
	Mailing Address 130 Dwight Pl.	<b>Transaction ID:</b> SA11AI.29393
	City Englewood State NJ Zip Code 07631	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	earmark-barrasso
	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 ▼ 2875.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 78  
(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)  
Rosalind Baruch

Mailing Address 130 Dwight Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer self Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29371  
 Amount of Each Receipt this Period: 575.00  
 mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Alan Berger

Mailing Address 24 Sutton Pl.

City Englewood State NJ Zip Code 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 ▼ 2375.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** SA11AI.29381  
 Amount of Each Receipt this Period: 2000.00  
 earmark-barrasso

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Berger

Mailing Address 24 Sutton Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer Alan W. Berger, MD Occupation Office Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2011  
**Transaction ID:** SA11AI.29409  
 Amount of Each Receipt this Period: 500.00  
 earmark-berkley

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3075.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 78  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Marc Berger  
 Mailing Address 210 W. 89th St.  
 City State Zip Code  
 New York NY 10024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation  
 self physician  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 2500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2011  
**Transaction ID:** SA11AI.29382  
 Amount of Each Receipt this Period  
 2000.00  
 earmark-barrasso

**B.** Full Name (Last, First, Middle Initial)  
Marc Berger  
 Mailing Address 210 W. 89th St.  
 City State Zip Code  
 New York NY 10024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation  
 self physician  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 3000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2011  
**Transaction ID:** SA11AI.29410  
 Amount of Each Receipt this Period  
 500.00  
 earmark-berkley

**C.** Full Name (Last, First, Middle Initial)  
Barry Berkowitz  
 Mailing Address 232 S. Dwight Pl.  
 City State Zip Code  
 Englewood NJ 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation  
 Self Attorney  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 350.00  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2011  
**Transaction ID:** SA11AI.29496  
 Amount of Each Receipt this Period  
 350.00  
 mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2850.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 78  
(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 Bernstein

Mailing Address 390 Eastwood Ct

City Englewood State NJ Zip Code 07631

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

Name of Employer Geblab Assoc Occupation executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2011

Transaction ID: SA11AI.29466

Amount of Each Receipt this Period 125.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Yehuda Blinder

Mailing Address 95 Dwight Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer ADAR Investment Mgmt Occupation Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 03 / 25 / 2011

Transaction ID: SA11AI.29353

Amount of Each Receipt this Period 250.00

membership

**C.**

Full Name (Last, First, Middle Initial)  
Yehuda Blinder

Mailing Address 95 Dwight Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer ADAR Investment Mgmt Occupation Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 03 / 28 / 2011

Transaction ID: SA11AI.29384

Amount of Each Receipt this Period 500.00

earmark-barrasso

**SUBTOTAL** of Receipts This Page (optional) ..... ► 875.00

**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 13 / 78  
(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)  
jonathan blinken  
Mailing Address na  
City na State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer na Occupation na  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt: 03 / 28 / 2011  
Transaction ID: SA11AI.29394  
Amount of Each Receipt this Period: 200.00  
earmark-barrasso

**B.** Full Name (Last, First, Middle Initial)  
Michael Blumenthal  
Mailing Address 139 Huguenot Ave.  
City Englewood State NJ Zip Code 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 ▼ 450.00  
Date of Receipt: 03 / 30 / 2011  
Transaction ID: SA11AI.29418  
Amount of Each Receipt this Period: 250.00  
earmark-berkley

**C.** Full Name (Last, First, Middle Initial)  
Bruce Brafman  
Mailing Address 269 Fountain Rd  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Verizon Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1800.00  
Date of Receipt: 03 / 20 / 2011  
Transaction ID: SA11AI.29517  
Amount of Each Receipt this Period: 1800.00  
membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2250.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 78  
(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)  
Hannah-Jean Brafman

Mailing Address 269 Fountain Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2011

Transaction ID: SA11AI.29417

Amount of Each Receipt this Period 500.00

earmark-berkley

**B.**

Full Name (Last, First, Middle Initial)  
bruce broder

Mailing Address na

City na State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 15 / 2011

Transaction ID: SA11AI.29483

Amount of Each Receipt this Period 350.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Haim Chasman

Mailing Address 548 Cumberland St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Mall Marketing Systems Occupation Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2011

Transaction ID: SA11AI.29314

Amount of Each Receipt this Period 300.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1150.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 245 Hutchinson Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation MD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 03 / 28 / 2011

Transaction ID: SA11AI.29385

Amount of Each Receipt this Period 2000.00

earmark-barrasso

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

Mailing Address na

City na State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2011

Transaction ID: SA11AI.29546

Amount of Each Receipt this Period 300.00

mission registration fee

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

Mailing Address na

City na State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2011

Transaction ID: SA11AI.29432

Amount of Each Receipt this Period 300.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 78  
(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)  
Alan Eisenman

Mailing Address 638 Evergreen Dr

City State Zip Code  
West Hempstead NJ 11552

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

Name of Employer Occupation  
AllianceBernstein Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

Transaction ID: SA11AI.29541

Amount of Each Receipt this Period  
350.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Reuven Escott

Mailing Address 55 Regent St.

City State Zip Code  
Bergenfield NJ 07621

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

Name of Employer Occupation  
Self Securities Trader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2011

Transaction ID: SA11AI.29370

Amount of Each Receipt this Period  
225.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Reuven Escott

Mailing Address 55 Regent St.

City State Zip Code  
Bergenfield NJ 07621

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

Name of Employer Occupation  
Self Securities Trader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1675.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2011

Transaction ID: SA11AI.29380

Amount of Each Receipt this Period  
250.00

earmark-barrasso

**SUBTOTAL** of Receipts This Page (optional) ..... ► **825.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 78  
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
miriam fagin

Mailing Address na

City na State NJ Zip Code 07666

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

Name of Employer na Occupation na

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 03 / 20 / 2011  
**Transaction ID:** SA11AI.29515  
 Amount of Each Receipt this Period: 425.00  
 mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Daniel Feuer

Mailing Address 335 Robin Road

City Englewood State NJ Zip Code 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 ▼ 425.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29602  
 Amount of Each Receipt this Period: 225.00  
 mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Nina Fischman

Mailing Address 703 Carlyle Ave.

City Woodmere State NY Zip Code 11598

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

Name of Employer slef Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 15 / 2011  
**Transaction ID:** SA11AI.29476  
 Amount of Each Receipt this Period: 250.00  
 mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 900.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 78  
(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)  
abe fishweicher  
Mailing Address na  
City na State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer na Occupation nA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 03 / 20 / 2011  
Transaction ID: SA11AI.29562  
Amount of Each Receipt this Period 300.00  
mission registration fee

**B.** Full Name (Last, First, Middle Initial)  
David Flamholz  
Mailing Address 300 Sunset Ave.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Abeles & Heymann Occupation Executive  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00  
Date of Receipt 03 / 25 / 2011  
Transaction ID: SA11AI.29356  
Amount of Each Receipt this Period 500.00  
earmark-nelson

**C.** Full Name (Last, First, Middle Initial)  
Mort Fridman  
Mailing Address 826 Winthrop Rd  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation MD  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2700.00  
Date of Receipt 03 / 16 / 2011  
Transaction ID: SA11AI.29322  
Amount of Each Receipt this Period 1000.00  
earmark-kingston

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1800.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 78

(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)  
Nancy Friedman

Mailing Address 874 Queen Anne Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
unemployed Teacher

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.29536

Amount of Each Receipt this Period

300.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Ben Frommer

Mailing Address 35 Eagles Notch Drive

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Heat Trak Sales

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.29605

Amount of Each Receipt this Period

225.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan Gellis

Mailing Address 235 New Bridge Rd.

City State Zip Code  
New Milford NJ 07646

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

Name of Employer Occupation  
Sloan Securities Stock 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 3 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.29428

Amount of Each Receipt this Period

300.00

mission registration fee

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

825.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 78  
(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) estelle glass		Date of Receipt MM / DD / YYYY 03 / 15 / 2011
Mailing Address 492 w. englewood ave		<b>Transaction ID:</b> SA11AI.29338
City teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer na	Occupation na	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**B.**

Full Name (Last, First, Middle Initial) Michael Goldberg		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
Mailing Address 207 booth ave		<b>Transaction ID:</b> SA11AI.29398
City englewod	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer na	Occupation na	earmark-barrasso
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) Fannie Goldsmith		Date of Receipt MM / DD / YYYY 03 / 08 / 2011
Mailing Address 1628 Hanover Street		<b>Transaction ID:</b> SA11AI.29462
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 275.00
Name of Employer self	Occupation Homemaker	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1625.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 78  
(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**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jerry Gontownik</p> <p>Mailing Address 250 Mountain Rd.</p> <p>City State Zip Code <b>Englewood NJ 07631</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Stone Post Realty Real Estate</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">375.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.29533</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">125.00</span> </p> <p>mission registration fee</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	0		2	0	1	1												

<p><b>B.</b> Full Name (Last, First, Middle Initial) Jerry Gontownik</p> <p>Mailing Address 250 Mountain Rd.</p> <p>City State Zip Code <b>Englewood NJ 07631</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Stone Post Realty Real Estate</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">875.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.29359</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span> </p> <p>earmark-nelson</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	5		2	0	1	1												

<p><b>C.</b> Full Name (Last, First, Middle Initial) Jerry Gontownik</p> <p>Mailing Address 250 Mountain Rd.</p> <p>City State Zip Code <b>Englewood NJ 07631</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Stone Post Realty Real Estate</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">1375.00</span></p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.29390</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span> </p> <p>earmark-barrasso</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	8		2	0	1	1												

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1125.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 78  
(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)  
Jerry Gontownik

Mailing Address 250 Mountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Stone Post Realty Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1875.00

Date of Receipt 03 / 28 / 2011

Transaction ID: SA11AI.29415

Amount of Each Receipt this Period 500.00

earmark-berkley

**B.**

Full Name (Last, First, Middle Initial)  
Herbert Gordon

Mailing Address 830 Downing St.

City Teaneck State NJ Zip Code 07666

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

Name of Employer Retired Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 20 / 2011

Transaction ID: SA11AI.29579

Amount of Each Receipt this Period 325.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Norman Gorlyn

Mailing Address 150 Madison Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 25 / 2011

Transaction ID: SA11AI.29360

Amount of Each Receipt this Period 350.00

membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1175.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 78  
(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)  
Susan Gottesman  
 Mailing Address 285 Sunset Ave.  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt MM / DD / YYYY  
03 / 21 / 2011  
**Transaction ID:** SA11AI.29329  
 Amount of Each Receipt this Period 500.00  
 earmark-nelson  
 FEC ID number of contributing federal political committee. C  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
Susan Gottesman  
 Mailing Address 285 Sunset Ave.  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt MM / DD / YYYY  
03 / 28 / 2011  
**Transaction ID:** SA11AI.29388  
 Amount of Each Receipt this Period 500.00  
 earmark-barrasso  
 FEC ID number of contributing federal political committee. C  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Susan Gottesman  
 Mailing Address 285 Sunset Ave.  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt MM / DD / YYYY  
03 / 30 / 2011  
**Transaction ID:** SA11AI.29411  
 Amount of Each Receipt this Period 500.00  
 earmark-berkley  
 FEC ID number of contributing federal political committee. C  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00  
**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 24 / 78  
(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)  
Susan Gottesman  
 Mailing Address 285 Sunset Ave.  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt MM / DD / YYYY  
03 / 30 / 2011  
**Transaction ID:** SA11AI.29414  
 Amount of Each Receipt this Period  
2000.00  
 earmark-berkley  
 FEC ID number of contributing federal political committee. C  
 Name of Employer retired Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

**B.** Full Name (Last, First, Middle Initial)  
stephanie granot  
 Mailing Address na  
 City na State NJ Zip Code 07666  
 Date of Receipt MM / DD / YYYY  
03 / 25 / 2011  
**Transaction ID:** SA11AI.29607  
 Amount of Each Receipt this Period  
225.00  
 mission registration fee  
 FEC ID number of contributing federal political committee. C  
 Name of Employer na Occupation na  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

**C.** Full Name (Last, First, Middle Initial)  
Israel HaCohen  
 Mailing Address 144-32 Gravett Road  
 City Flushing State NY Zip Code 11367  
 Date of Receipt MM / DD / YYYY  
03 / 20 / 2011  
**Transaction ID:** SA11AI.29566  
 Amount of Each Receipt this Period  
250.00  
 mission registration fee  
 FEC ID number of contributing federal political committee. C  
 Name of Employer na Occupation Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2475.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 689 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 ▼ 350.00

Date of Receipt: 03 / 20 / 2011  
Transaction ID: SA11AI.29561  
Amount of Each Receipt this Period: 350.00  
mission registration fee

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

Mailing Address 160 W. 66th St.

City State Zip Code  
New York NY 10023

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

Name of Employer Atlantic Realty Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 21 / 2011  
Transaction ID: SA11AI.29335  
Amount of Each Receipt this Period: 5000.00  
membership

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

Mailing Address 160 W. 66th St.

City State Zip Code  
New York NY 10023

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

Name of Employer Atlantic Realty Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7000.00

Date of Receipt: 03 / 28 / 2011  
Transaction ID: SA11AI.29386  
Amount of Each Receipt this Period: 2000.00  
earmark-barrasso

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 78
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew Herenstein	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address 3 Dogwood Lane	<b>Transaction ID:</b> SA11AI.29609
	City State Zip Code Lawrence NY 11559	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation Quadrangle Managing Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Herenstein	Date of Receipt MM / DD / YYYY 03 / 20 / 2011
	Mailing Address 820 Winthrop Rd.	<b>Transaction ID:</b> SA11AI.29529
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation Saranac Capital Partners finance/money manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Rachel Hersey	Date of Receipt MM / DD / YYYY 03 / 08 / 2011
	Mailing Address 286 Booth Avenue	<b>Transaction ID:</b> SA11AI.29459
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation Ernst & Young Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	825.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 78

(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)  
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 self Occupation  
self md

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 6500.00

Date of Receipt

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

Transaction ID: SA11AI.29354

Amount of Each Receipt this Period

2500.00

earmark-nelson

B.

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 self Occupation  
self md

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt

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

Transaction ID: SA11AI.29406

Amount of Each Receipt this Period

1000.00

earmark-berkley

C.

Full Name (Last, First, Middle Initial)  
Jeffrey Hochberg

Mailing Address 23 Hampton Court

City State Zip Code  
Bergenfield NJ 07621

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

Name of Employer Occupation  
Sullivan & Cromwell Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.29263

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Jeffrey Hochberg  
Mailing Address 23 Hampton Court  
City Bergenfield State NJ Zip Code 07621  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Sullivan & Cromwell Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 03 / 01 / 2011  
Transaction ID: SA11AI.29265  
Amount of Each Receipt this Period 500.00  
earmark-tester for senate

**B.** Full Name (Last, First, Middle Initial)  
larry irom  
Mailing Address na  
City na State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer na Occupation na  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 03 / 20 / 2011  
Transaction ID: SA11AI.29564  
Amount of Each Receipt this Period 350.00  
mission registration fee

**C.** Full Name (Last, First, Middle Initial)  
Bob Jacobs  
Mailing Address 480 Cumberland Rd.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Real Estate  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 03 / 28 / 2011  
Transaction ID: SA11AI.29392  
Amount of Each Receipt this Period 500.00  
earmark-barrasso

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 78

(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)  
Julie Jedwab

Mailing Address 25 Bayberry Road

City State Zip Code  
Lawrence NJ 11559

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

Name of Employer Occupation  
n/a n/a

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 05 / 2011

Transaction ID: SA11AI.29437

Amount of Each Receipt this Period

300.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Dov Kahane

Mailing Address 573 Churchill Rd.

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Self Dentist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 20 / 2011

Transaction ID: SA11AI.29549

Amount of Each Receipt this Period

300.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
elayne kalina

Mailing Address n/a

City State Zip Code  
n/a NJ 07631

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

Name of Employer Occupation  
na na

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 03 / 2011

Transaction ID: SA11AI.29309

Amount of Each Receipt this Period

250.00

mission registration fee

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

850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Esti Kaminetzky	Date of Receipt MM / DD / YYYY 03 / 08 / 2011
	Mailing Address 786 Downing St	<b>Transaction ID:</b> SA11AI.29313
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 550.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission registration fee
Name of Employer Self	Occupation Learning Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eli Katz	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address 263 Frances Street	<b>Transaction ID:</b> SA11AI.29587
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 450.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission registration fee
Name of Employer Troster Singer Inc.	Occupation Stock Trader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Kazer	Date of Receipt MM / DD / YYYY 03 / 16 / 2011
	Mailing Address 227 Walnut St.	<b>Transaction ID:</b> SA11AI.29323
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. <b>C</b>	mission registration fee
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1275.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Judy Kershner		Date of Receipt
	Mailing Address 292 Robin Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29372
Name of Employer Hackensack U Medical Center		Occupation Physical Therapist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 225.00
			mission registration fee

<b>B.</b>	Full Name (Last, First, Middle Initial) George Klafter		Date of Receipt
	Mailing Address 227 East Linden Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29355
Name of Employer Urology associates		Occupation physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00
			earmark-nelson

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Klapper		Date of Receipt
	Mailing Address 531 Emerson Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Teaneck	NJ	07666
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.29499
Name of Employer na		Occupation na	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 125.00
			mission registration fee

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 850.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 78  
(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)  
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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 03 / 21 / 2011  
**Transaction ID:** SA11AI.29328  
 Amount of Each Receipt this Period: 525.00  
 mission registration fee

**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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3025.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29358  
 Amount of Each Receipt this Period: 2500.00  
 earmark-nelson

**C.**

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3525.00

Date of Receipt: 03 / 30 / 2011  
**Transaction ID:** SA11AI.29408  
 Amount of Each Receipt this Period: 500.00  
 earmark-berkley

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3525.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 78

(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)  
Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
none Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: SA11AI.29331

Amount of Each Receipt this Period

500.00

earmark-nelson

**B.**

Full Name (Last, First, Middle Initial)  
Ruben Kuznieck

Mailing Address 101 Hillside Ave

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
self Doctor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.29378

Amount of Each Receipt this Period

250.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Ruben Kuznieck

Mailing Address 101 Hillside Ave

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
self Doctor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.29402

Amount of Each Receipt this Period

100.00

earmark-barrasso

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

850.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 78  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) steven lang		Date of Receipt MM / DD / YYYY 03 / 25 / 2011
Mailing Address na		<b>Transaction ID:</b> SA11AI.29610
City na	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 325.00
Name of Employer na	Occupation na	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

**B.**

Full Name (Last, First, Middle Initial) alex lebowitz		Date of Receipt MM / DD / YYYY 03 / 20 / 2011
Mailing Address 121 willow rd		<b>Transaction ID:</b> SA11AI.29571
City woodmere	State NY	Zip Code 11598
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer retired	Occupation retired	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**C.**

Full Name (Last, First, Middle Initial) Kevin Lemmer		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
Mailing Address 140 Downey Dr.		<b>Transaction ID:</b> SA11AI.29379
City Tenafly	State NJ	Zip Code 07670
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer ADAR Investment Management	Occupation Portfolio Manager	earmark-barrasso
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	925.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 78  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Kevin Lemmer

Mailing Address 140 Downey Dr.

City Tenafly State NJ Zip Code 07670

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

Name of Employer ADAR Investment Management Occupation Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt: 03 / 30 / 2011  
**Transaction ID:** SA11AI.29405  
 Amount of Each Receipt this Period: 500.00  
 earmark-berkley

**B.**

Full Name (Last, First, Middle Initial)  
Paul Lerer

Mailing Address 270 Mountain Rd.

City Englewood State NJ Zip Code 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 ▼ 325.00

Date of Receipt: 03 / 28 / 2011  
**Transaction ID:** SA11AI.29387  
 Amount of Each Receipt this Period: 250.00  
 earmark-barrasso

**C.**

Full Name (Last, First, Middle Initial)  
Jerry Lewkowitz

Mailing Address 140 N. Woodland Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer People Care, Inc. Occupation Health care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29357  
 Amount of Each Receipt this Period: 500.00  
 earmark-nelson

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 78  
(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) Menachem Lifshitz		Date of Receipt MM / DD / YYYY 03 / 20 / 2011
Mailing Address na		<b>Transaction ID:</b> SA11AI.29542
City na	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 425.00
Name of Employer na	Occupation na	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

**B.**

Full Name (Last, First, Middle Initial) Margot Mann		Date of Receipt MM / DD / YYYY 03 / 20 / 2011
Mailing Address 4550 Livingston Avenue		<b>Transaction ID:</b> SA11AI.29508
City Bronx	State NY	Zip Code 10471
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Self	Occupation lactation consultant	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Joseph Mark		Date of Receipt MM / DD / YYYY 03 / 08 / 2011
Mailing Address 166 Norma Road		<b>Transaction ID:</b> SA11AI.29445
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Hambro America Inc.	Occupation Investment Banker	mission registration fee
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1175.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>775.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 37 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address na

City na State NJ Zip Code 07666

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

Name of Employer na Occupation na

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29592  
 Amount of Each Receipt this Period: 225.00  
 mission registration fee

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

Mailing Address 11 Fairway Ct.

City Cresskill State NJ Zip Code 07626

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

Name of Employer self Occupation Social Worker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 25 / 2011  
**Transaction ID:** SA11AI.29591  
 Amount of Each Receipt this Period: 225.00  
 mission registration fee

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

Mailing Address 181 East 90th

City New York State NY Zip Code 10128

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

Name of Employer Muss Development Corp Occupation Real Estate Developer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: 03 / 08 / 2011  
**Transaction ID:** SA11AI.29315  
 Amount of Each Receipt this Period: 1000.00  
 earmark-tester for senate

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Nina Nanasi	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address 265 Mountain Road	<b>Transaction ID:</b> SA11AI.29373
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer n/a Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) sherelle narin	Date of Receipt MM / DD / YYYY 03 / 15 / 2011
	Mailing Address 10 sutton pl	<b>Transaction ID:</b> SA11AI.29345
	City State Zip Code englewood NJ 07631	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer na Occupation na Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) sarah naus	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address 8 brian rd	<b>Transaction ID:</b> SA11AI.29598
	City State Zip Code e. brunswick NJ 08816	Amount of Each Receipt this Period 225.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer naus trim co Occupation businesswoman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>725.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
azriel novogroder

Mailing Address 782 dearborn st

City State Zip Code  
teaneck NJ 07666

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

Name of Employer self Occupation physical therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  /  /   
**Transaction ID:** SA11AI.29475

Amount of Each Receipt this Period 300.00

mission registration fee

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

Mailing Address 286 churchill rd

City State Zip Code  
Teaneck NJ 07631

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

Name of Employer Dewey Ballantine Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  /  /   
**Transaction ID:** SA11AI.29436

Amount of Each Receipt this Period 250.00

mission registration fee

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

Mailing Address 159 Maple St.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Kingsbrook Investments Occupation Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  /  /   
**Transaction ID:** SA11AI.29421

Amount of Each Receipt this Period 500.00

eamark-nelson

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

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

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

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

FOR LINE NUMBER: PAGE 40 / 78  
(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 penstein

Mailing Address na

City na State NJ Zip Code 07631

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

Name of Employer na Occupation na

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 1 1

**Transaction ID:** SA11AI.29503

Amount of Each Receipt this Period  
300.00

mission registration fee

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

Mailing Address 750 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Metals Business

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 0 8 / 2 0 1 1

**Transaction ID:** SA11AI.29450

Amount of Each Receipt this Period  
300.00

mission registration fee

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

Mailing Address 217 Cedar St

City Engelwood State NJ Zip Code 07631

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

Name of Employer Self Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 1 1

**Transaction ID:** SA11AI.29524

Amount of Each Receipt this Period  
300.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 78  
(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 Plotzker

Mailing Address 1273 Dickerson rd.

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Medco Health Solutions, Inc. I.T. Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2011

**Transaction ID:** SA11AI.29317

Amount of Each Receipt this Period  
175.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
larry prince

Mailing Address 32 greenwood ave

City State Zip Code  
west orange NJ 07052

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

Name of Employer Occupation  
n/a sales mngmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** SA11AI.29568

Amount of Each Receipt this Period  
175.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Yaakov Pultman

Mailing Address 172 Bennett Rd.

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
na na

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** SA11AI.29513

Amount of Each Receipt this Period  
300.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 78  
(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)  
Beverly Rabinowitz

Mailing Address 1600 parker ave

City State Zip Code  
fort lee NJ 07024

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

Name of Employer Occupation  
na na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2011

**Transaction ID:** SA11AI.29368

Amount of Each Receipt this Period  
250.00

mission registration fee

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

Mailing Address 83 E. Linden Ave.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
JPMorgan VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2011

**Transaction ID:** SA11AI.29416

Amount of Each Receipt this Period  
500.00

earmark-berkley

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

Mailing Address na

City State Zip Code  
na NJ 07631

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

Name of Employer Occupation  
na na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2011

**Transaction ID:** SA11AI.29612

Amount of Each Receipt this Period  
225.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **975.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 78

(check only one)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.

Full Name (Last, First, Middle Initial)  
Michael Ratzker

Mailing Address 360 Mountain Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Alner-Midland Mitau Trader

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2011

Transaction ID: SA11AI.29400

Amount of Each Receipt this Period

300.00

earmark-barrasso

B.

Full Name (Last, First, Middle Initial)  
hillel rayman

Mailing Address 461 harrison ave

City State Zip Code  
highland park NJ 08904

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

Name of Employer Occupation  
na na

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 15 / 2011

Transaction ID: SA11AI.29324

Amount of Each Receipt this Period

350.00

mission registration fee

C.

Full Name (Last, First, Middle Initial)  
Bruce Ritholtz

Mailing Address 145 West 67th Street

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Self Oil Trader

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 20 / 2011

Transaction ID: SA11AI.29554

Amount of Each Receipt this Period

300.00

mission registration fee

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 78  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Jack Rosen  
 Mailing Address 18 E. 85th St  
 City State Zip Code  
 New York NY 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Real Estate  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 1 1  
**Transaction ID:** SA11AI.29332  
 Amount of Each Receipt this Period  
 1000.00  
 earmark-berkeley

**B.** Full Name (Last, First, Middle Initial)  
marc rothenberg  
 Mailing Address 40 rector ct  
 City State Zip Code  
 bergenfield NJ 07621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 law firm of allen rothenberg exec  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 1 1  
**Transaction ID:** SA11AI.29429  
 Amount of Each Receipt this Period  
 300.00  
 mission registration fee

**C.** Full Name (Last, First, Middle Initial)  
josh rovrer  
 Mailing Address 132 lycecker ave  
 City State Zip Code  
 englewood NJ 07631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 premier orthopedics md  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 8 / 2 0 1 1  
**Transaction ID:** SA11AI.29401  
 Amount of Each Receipt this Period  
 1000.00  
 earmark-barrasso

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2300.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 78  
(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)  
Ranee Rubenstein

Mailing Address 12 Dale Dr

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Occupation  
JCC of MetroWest Social Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2011

**Transaction ID:** SA11AI.29424

Amount of Each Receipt this Period  
275.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Rachel Rudman

Mailing Address 3 Rose Street

City State Zip Code  
Cedarhurst NY 11516

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

Name of Employer Occupation  
Self occupational therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** SA11AI.29501

Amount of Each Receipt this Period  
300.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Marty Schlakman

Mailing Address 200 Lyman Pl.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Psychiatry Assoc. Psychiatrist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2011

**Transaction ID:** SA11AI.29471

Amount of Each Receipt this Period  
475.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Schlusel	Date of Receipt MM / DD / YYYY 03 / 21 / 2011
	Mailing Address 100 Lydecker St.	<b>Transaction ID:</b> SA11AI.29330
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	earmark-nelson
	Name of Employer Occupation Columbia U Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard Schlusel	Date of Receipt MM / DD / YYYY 03 / 28 / 2011
	Mailing Address 100 Lydecker St.	<b>Transaction ID:</b> SA11AI.29383
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	earmark-barrasso
	Name of Employer Occupation Columbia U Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Schlusel	Date of Receipt MM / DD / YYYY 03 / 30 / 2011
	Mailing Address 100 Lydecker St.	<b>Transaction ID:</b> SA11AI.29412
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	earmark-berkley
	Name of Employer Occupation Columbia U Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 78  
(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

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

NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Ariel Schochet

Mailing Address 283 Churchill Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Fortress Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
MM / DD / YYYY  
03 / 05 / 2011

**Transaction ID:** SA11AI.29431

Amount of Each Receipt this Period  
425.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
David Schreiber

Mailing Address 3 Regent Dr

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Occupation  
self attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2011

**Transaction ID:** SA11AI.29487

Amount of Each Receipt this Period  
350.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Gloria Schreiber

Mailing Address 601 chestnut st apta7

City State Zip Code  
cedarhurst NY 11516

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

Name of Employer Occupation  
retired retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2011

**Transaction ID:** SA11AI.29464

Amount of Each Receipt this Period  
350.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1125.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 78

(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

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

NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Moshe Schreiber

Mailing Address 19 Harrison S

City State Zip Code  
edison NJ 08817

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

Name of Employer Occupation  
na na

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: SA11AI.29336

Amount of Each Receipt this Period

350.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
James Schwalbe

Mailing Address 320 Walnut St.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
James E Schwalbe PC attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.29404

Amount of Each Receipt this Period

360.00

earmark-barrasso

**C.**

Full Name (Last, First, Middle Initial)  
Allan Schwartz

Mailing Address 590 Maitland Ave

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
AMP Networks VP Sales & Business Dev.

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.29606

Amount of Each Receipt this Period

225.00

mission registration fee

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

935.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Tzvi Sebrow	Date of Receipt MM / DD / YYYY 03 / 20 / 2011
	Mailing Address 596 Rutland Ave.	<b>Transaction ID:</b> SA11AI.29556
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation Rapitech systems Director of Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) alex shraga	Date of Receipt MM / DD / YYYY 03 / 25 / 2011
	Mailing Address na	<b>Transaction ID:</b> SA11AI.29596
	City State Zip Code na NJ 07631	Amount of Each Receipt this Period 725.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation na na	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elliot Shulman	Date of Receipt MM / DD / YYYY 03 / 05 / 2011
	Mailing Address 105 Dana Place	<b>Transaction ID:</b> SA11AI.29427
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 550.00
	FEC ID number of contributing federal political committee. C	mission registration fee
	Name of Employer Occupation Self Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1575.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 50 / 78  
(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)  
Elliot Shulman  
 Mailing Address 105 Dana Place  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29361  
 Amount of Each Receipt this Period 50.00  
 membership  
 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 600.00

**B.** Full Name (Last, First, Middle Initial)  
Yale Shulman  
 Mailing Address 94 E. Linden Ave.  
 City Englewood State NJ Zip Code 07631  
 Date of Receipt 03 / 25 / 2011  
**Transaction ID:** SA11AI.29366  
 Amount of Each Receipt this Period 200.00  
 memberhsip  
 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 575.00

**C.** Full Name (Last, First, Middle Initial)  
Joy Sklar  
 Mailing Address 95 Norfolk St  
 City Bergenfield State NJ Zip Code 07621  
 Date of Receipt 03 / 08 / 2011  
**Transaction ID:** SA11AI.29457  
 Amount of Each Receipt this Period 125.00  
 mission registration fee  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 375.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 78
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Karin Slaten		Date of Receipt
	Mailing Address 700 Cottage Place		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Teaneck	NJ	07666
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer self		Occupation	Transaction ID: SA11AI.29534 Amount of Each Receipt this Period <input type="text" value="425.00"/> mission registration fee
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Tzvi Small		Date of Receipt
	Mailing Address 230 Fountain Road		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation	Transaction ID: SA11AI.29601 Amount of Each Receipt this Period <input type="text" value="725.00"/> mission registration fee
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="725.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) david sohnen		Date of Receipt
	Mailing Address na		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	na	NJ	07631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer na		Occupation	Transaction ID: SA11AI.29481 Amount of Each Receipt this Period <input type="text" value="300.00"/> mission registration fee
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1450.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 52 / 78  
(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)  
Alan Spiegel

Mailing Address 281 East Linden Avenue

City Englewood State NJ Zip Code 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 ▼ 400.00

Date of Receipt 03 / 25 / 2011

Transaction ID: SA11AI.29599

Amount of Each Receipt this Period 400.00

mission registration fee

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

Mailing Address 669 Sewell Pl.

City Teaneck State NJ Zip Code 07666

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

Name of Employer I Spiewak & sons Occupation manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2011

Transaction ID: SA11AI.29463

Amount of Each Receipt this Period 300.00

mission registration fee

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

Mailing Address 62 Walnut Court

City Englewood State NJ Zip Code 07631

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

Name of Employer Sullivan & Cromwell LLC Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 08 / 2011

Transaction ID: SA11AI.29446

Amount of Each Receipt this Period 600.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 78

(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)  
Irina Stein

Mailing Address 201 West 70th St, Apt 18H

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
n/a Homemaker

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 08 / 2011

Transaction ID: SA11AI.29447

Amount of Each Receipt this Period

300.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
David Steinberg

Mailing Address 70-30 137 St.

City State Zip Code  
Flushing NY 11367

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

Name of Employer Occupation  
self Mortgage Broker

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1275.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2011

Transaction ID: SA11AI.29318

Amount of Each Receipt this Period

500.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
jacob steinmetz

Mailing Address na

City State Zip Code  
na NJ 07631

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

Name of Employer Occupation  
na na

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 15 / 2011

Transaction ID: SA11AI.29477

Amount of Each Receipt this Period

300.00

mission registration fee

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

1100.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 78  
(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)  
Stanley 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 Business

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 999.00

Date of Receipt: 03 / 25 / 2011  
Transaction ID: SA11AI.29333  
Amount of Each Receipt this Period: 999.00  
earmark-barrasso

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

Mailing Address 46 Hidden Ledge Rd.

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 ▼ 225.00

Date of Receipt: 03 / 25 / 2011  
Transaction ID: SA11AI.29600  
Amount of Each Receipt this Period: 225.00  
mission registration fee

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

Mailing Address na

City State Zip Code  
na NJ 07666

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

Name of Employer na Occupation na

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 20 / 2011  
Transaction ID: SA11AI.29505  
Amount of Each Receipt this Period: 300.00  
mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1524.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 78  
(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)  
isaak volodarsky

Mailing Address na

City na State NJ Zip Code 07666

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

Name of Employer na Occupation na

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2011

**Transaction ID:** SA11AI.29538

Amount of Each Receipt this Period  
275.00

mission registration fee

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

Mailing Address 11 greenway ct

City woodcliff lake State NJ Zip Code 07677

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

Name of Employer select express & logistics Occupation ceo

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2011

**Transaction ID:** SA11AI.29578

Amount of Each Receipt this Period  
275.00

mission registration fee

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

Mailing Address 66 Chauncey Ln

City Lawrence State NY Zip Code 11559

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

Name of Employer Self Occupation Lawyer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 08 / 2011

**Transaction ID:** SA11AI.29455

Amount of Each Receipt this Period  
300.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 78  
(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 Warburg

Mailing Address 240 Hutchinson Rd.

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 ▼ 300.00

Date of Receipt: 03 / 15 / 2011  
Transaction ID: SA11AI.29469  
Amount of Each Receipt this Period: 300.00  
mission registration fee

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

Mailing Address 1296 Somerset Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer N/A Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 25 / 2011  
Transaction ID: SA11AI.29582  
Amount of Each Receipt this Period: 225.00  
mission registration fee

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

Mailing Address 822 Downing St.

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Ernst & Young Occupation Accountant/Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 25 / 2011  
Transaction ID: SA11AI.29352  
Amount of Each Receipt this Period: 5000.00  
membership

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5525.00

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 78  
(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)  
Linda Weissman

Mailing Address 688 Longacre Ave

City State Zip Code  
Woodmere NY 11598

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

Name of Employer Longacre Occupation Office manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 04 / 2011

**Transaction ID:** SA11AI.29426

Amount of Each Receipt this Period  
300.00

mission registration fee

**B.**

Full Name (Last, First, Middle Initial)  
Mark Wertenteil

Mailing Address 296 Rutland Avenue

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer self Occupation physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2011

**Transaction ID:** SA11AI.29522

Amount of Each Receipt this Period  
1300.00

mission registration fee

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Wiesel

Mailing Address na

City State Zip Code  
na NJ 07631

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

Name of Employer na Occupation na

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
03 / 05 / 2011

**Transaction ID:** SA11AI.29434

Amount of Each Receipt this Period  
350.00

mission registration fee

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1950.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 78
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Edwin Wolf		Date of Receipt
	Mailing Address 269 vandelinde ave		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	teaneck	NJ	07666
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation MD	Transaction ID: SA11AI.29521
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="125.00"/>
mission registration fee			

<b>B.</b>	Full Name (Last, First, Middle Initial) Eugene Wolfson		Date of Receipt
	Mailing Address 3840 Greystone Av		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Bronx	NY	10463
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Goldman Sachs		Occupation software engineer	Transaction ID: SA11AI.29454
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="525.00"/>	<input type="text" value="125.00"/>
mission registration fee			

<b>C.</b>	Full Name (Last, First, Middle Initial) Aron Zanger		Date of Receipt
	Mailing Address 342 Jones Rd		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Real Estate	Transaction ID: SA11AI.29311
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
mission registration fee			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="81509.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 78
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
Mailing Address 1445 Valley Rd		<b>Transaction ID:</b> SA17.29234
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.47
Name of Employer	Occupation	interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.24	

**B.**

Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt MM / DD / YYYY 03 / 31 / 2011
Mailing Address 1445 Valley Rd		<b>Transaction ID:</b> SA17.29235
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 352.01
Name of Employer	Occupation	cd interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.25	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	352.48
<b>TOTAL</b> This Period (last page this line number only) .....	▶	352.48

**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)

<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) Lisa Berg	Transaction ID: SB21B.29253
	Mailing Address na	Date of Disbursement 03 / 01 / 2011
	City na State NJ Zip Code 07052	Amount of Each Disbursement this Period 790.44
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) Lisa Berg	Transaction ID: SB21B.29276
	Mailing Address na	Date of Disbursement 03 / 15 / 2011
	City na State NJ Zip Code 07052	Amount of Each Disbursement this Period 838.67
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) Mindy Berman	Transaction ID: SB21B.29254
	Mailing Address 312 Cedar Ave	Date of Disbursement 03 / 01 / 2011
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period 795.03
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2424.14
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 61 / 78

<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) Mindy Berman	Transaction ID: SB21B.29277
	Mailing Address 312 Cedar Ave	Date of Disbursement 03 / 15 / 2011
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period 1098.19
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mindy Berman	Transaction ID: SB21B.29296
	Mailing Address 312 Cedar Ave	Date of Disbursement 03 / 29 / 2011
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period 1245.18
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Centerplate/NBSE	Transaction ID: SB21B.29305
	Mailing Address 801 mt vernon pl	Date of Disbursement 03 / 30 / 2011
	City washington State DC Zip Code 20002	Amount of Each Disbursement this Period 10337.34
	Purpose of Disbursement food for mission	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12680.71
<b>TOTAL</b> 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)

<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) Internal Revenue Service	Transaction ID: SB21B.29274 Date of Disbursement																			
	Mailing Address N/A	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	1												
	City Ogden State UT Zip Code 84201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement form 1120-POL	<table border="1"><tr><td>1095.00</td></tr></table>	1095.00																		
1095.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Jewish Media Group LLC	Transaction ID: SB21B.29272 Date of Disbursement																			
	Mailing Address 5455 Wilshire Blvd Suite # 1000	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	1	1												
	City Los Angelis State NY Zip Code 90036	Amount of Each Disbursement this Period																			
	Purpose of Disbursement mission ad	<table border="1"><tr><td>375.00</td></tr></table>	375.00																		
375.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Jewish Media Group LLC	Transaction ID: SB21B.29290 Date of Disbursement																			
	Mailing Address 5455 Wilshire Blvd Suite # 1000	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	1	1												
	City Los Angelis State NY Zip Code 90036	Amount of Each Disbursement this Period																			
	Purpose of Disbursement mission ad	<table border="1"><tr><td>995.00</td></tr></table>	995.00																		
995.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2465.00</td></tr></table>	2465.00
2465.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)

<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) Jewish Media Group LLC	Transaction ID: SB21B.29292
	Mailing Address 5455 Wilshire Blvd Suite # 1000	Date of Disbursement MM / DD / YYYY 03 / 23 / 2011
	City Los Angelis State NY Zip Code 90036	Amount of Each Disbursement this Period 375.00
	Purpose of Disbursement mission ad Candidate Name	Category/Type
	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) Long Island Jewish World	Transaction ID: SB21B.29271
	Mailing Address 1525 Central Ave	Date of Disbursement MM / DD / YYYY 03 / 08 / 2011
	City Far Rockaway State NY Zip Code 11691	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement mission ad Candidate Name	Category/Type
	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) Long Island Jewish World	Transaction ID: SB21B.29291
	Mailing Address 1525 Central Ave	Date of Disbursement MM / DD / YYYY 03 / 18 / 2011
	City Far Rockaway State NY Zip Code 11691	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement mission ad Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1575.00
<b>TOTAL</b> 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)

<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) Monsey Tours	Transaction ID: SB21B.29306
	Mailing Address 870 Dean St	Date of Disbursement MM / DD / YYYY 03 / 31 / 2011
	City Brooklyn State NY Zip Code 11238	Amount of Each Disbursement this Period 50525.00
	Purpose of Disbursement buses for mission	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NJ Jewish News	Transaction ID: SB21B.29269
	Mailing Address 901 Route 10	Date of Disbursement MM / DD / YYYY 03 / 08 / 2011
	City Whippany State NJ Zip Code 07981	Amount of Each Disbursement this Period 388.80
	Purpose of Disbursement mission ad	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NJ Jewish News	Transaction ID: SB21B.29282
	Mailing Address 901 Route 10	Date of Disbursement MM / DD / YYYY 03 / 15 / 2011
	City Whippany State NJ Zip Code 07981	Amount of Each Disbursement this Period 388.80
	Purpose of Disbursement mission ad	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>51302.60</b>
<b>TOTAL</b> 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) Leonor Nunez	Transaction ID: SB21B.29255 Date of Disbursement																			
	Mailing Address 526 Longview Ave	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
	City Cliffsides Park State NJ Zip Code 07010	Amount of Each Disbursement this Period																			
	Purpose of Disbursement payroll	<table border="1"><tr><td>434.33</td></tr></table>	434.33																		
434.33																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Leonor Nunez	Transaction ID: SB21B.29297 Date of Disbursement																			
	Mailing Address 526 Longview Ave	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	1												
	City Cliffsides Park State NJ Zip Code 07010	Amount of Each Disbursement this Period																			
	Purpose of Disbursement payroll	<table border="1"><tr><td>434.33</td></tr></table>	434.33																		
434.33																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.29259 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement taxes	<table border="1"><tr><td>1157.62</td></tr></table>	1157.62																		
1157.62																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2026.28</td></tr></table>	2026.28
2026.28		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.29260 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement invoice	<table border="1"><tr><td>177.40</td></tr></table>	177.40																		
177.40																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.29281 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	1												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement taxes	<table border="1"><tr><td>1240.21</td></tr></table>	1240.21																		
1240.21																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.29299 Date of Disbursement																			
	Mailing Address 1551 S. Washington Ave.	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	1												
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period																			
	Purpose of Disbursement taxes	<table border="1"><tr><td>1181.23</td></tr></table>	1181.23																		
1181.23																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2598.84</td></tr></table>	2598.84
2598.84		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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) paypal	Transaction ID: SB21B.29236 Date of Disbursement 03 / 31 / 2011
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 1215.10
	City Omaha State NE Zip Code 68145	
	Purpose of Disbursement service fee Candidate Name	Category/Type
	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) Karen Pichkhadze	Transaction ID: SB21B.29256 Date of Disbursement 03 / 01 / 2011
	Mailing Address 1038 Kingsland Lane	Amount of Each Disbursement this Period 1481.74
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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 Pichkhadze	Transaction ID: SB21B.29279 Date of Disbursement 03 / 15 / 2011
	Mailing Address 1038 Kingsland Lane	Amount of Each Disbursement this Period 1477.08
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) ..... ▶

4173.92

**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) Karen Pichkhadze	Transaction ID: SB21B.29298 Date of Disbursement 03 / 29 / 2011
	Mailing Address 1038 Kingsland Lane	Amount of Each Disbursement this Period 1649.31
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) Projection Presentation Tech	Transaction ID: SB21B.29273 Date of Disbursement 03 / 11 / 2011
	Mailing Address 801 mt vernon pl	Amount of Each Disbursement this Period 3512.04
	City washington State DC Zip Code 20002	
	Purpose of Disbursement audio, stage, sound for mission Candidate Name	Category/Type
	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) jodie salit	Transaction ID: SB21B.29257 Date of Disbursement 03 / 01 / 2011
	Mailing Address n/a	Amount of Each Disbursement this Period 578.74
	City n/a State NJ Zip Code 07631	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5740.09
<b>TOTAL</b> 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)

<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) jodie salit	Transaction ID: SB21B.29280 Date of Disbursement 03 / 15 / 2011
	Mailing Address n/a	
	City n/a State NJ Zip Code 07631	Amount of Each Disbursement this Period 316.93
	Purpose of Disbursement payroll Candidate Name	Category/Type
	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) susquehanna bank	Transaction ID: SB21B.29261 Date of Disbursement 03 / 02 / 2011
	Mailing Address 26 N. Cedar St	
	City Lilitz State PA Zip Code 17543	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement karen's car expense Candidate Name	Category/Type
	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) Talkline Communications	Transaction ID: SB21B.29288 Date of Disbursement 03 / 17 / 2011
	Mailing Address p. o. box 1234	
	City new york State NY Zip Code 10023	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement radio ad Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1616.93
<b>TOTAL</b> 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)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Travelers-RMD, Workers Compensation</p> <p>Mailing Address One Tower Square</p> <p>City Hartford State CT Zip Code 06183</p> <p>Purpose of Disbursement insurance-workers comp</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.29302</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="485.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement wire transfer fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.29275</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="25.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement credit card purchases (see memo txt)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.29283</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="954.19"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1464.19"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.29283**

USPS \$22.53; Total event catering \$741.46; constant contact \$80; Columbia books \$63.01; Staples \$47-.19

# 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)

<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)  
Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement credit card fee

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.29233  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
Verizon wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement cell phone

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.29301  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....

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



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

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

FOR LINE NUMBER:  
(check only one)

<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.	Full Name (Last, First, Middle Initial) JOHN BARRASSO	Transaction ID: SB23.29307 Date of Disbursement 03 / 30 / 2011
	Mailing Address 6896 CASPER MOUNTAIN ROAD	Amount of Each Disbursement this Period 16009.00
	City CASPER State WY Zip Code 82601	
	Purpose of Disbursement earmarks-see memo txt	Category/ Type
	Candidate Name JOHN BARRASSO	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WY District: 00	

B.	Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS	Transaction ID: SB23.29303 Date of Disbursement 03 / 30 / 2011
	Mailing Address 3069 CONQUISTA COURT	Amount of Each Disbursement this Period 8900.00
	City LAS VEGAS State NV Zip Code 89121	
	Purpose of Disbursement earmarks-see memo txt	Category/ Type
	Candidate Name Berkley for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 01	

C.	Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS	Transaction ID: SB23.29304 Date of Disbursement 03 / 30 / 2011
	Mailing Address 3069 CONQUISTA COURT	Amount of Each Disbursement this Period 5000.00
	City LAS VEGAS State NV Zip Code 89121	
	Purpose of Disbursement pac contribution	Category/ Type
	Candidate Name Berkley for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	29909.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

A. Form/Schedule : **SB23**  
Transaction ID : **SB23.29307**

the following is a list of contributors: kevin lemmer \$250; reuven escott \$250; marc berger \$2000; alan berger \$2000; richie schluskel \$100; yehuda blinder \$500; ben chouake \$2000; jack halpern \$2000; paul lerer \$250; gottesman \$500; aviva levinson \$200; jerry gontownik \$500; robert jacobs \$500; howard baruch \$1000; jonathan blinken \$200; mike goldberg \$1000; josh rovner \$1000; ruben kuzniecky \$100; james schwalbe \$360 stanley stern \$999, mike ratzker \$300.

B. Form/Schedule : **SB23**  
Transaction ID : **SB23.29303**

the following is a list of contributors: kevin lemmer \$500; esther hershenbaum \$1000; leon kozak \$500; marc berger \$500; deborah berger \$500; susan gottesman \$500; richie schluskel \$150; susan gottesman \$2000; robert gottesman \$500; hanna brafman \$500; jerr gontownik \$500; david rabinowitz \$500; mike blumenthal \$250; jack rosen \$1000.

# 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)

<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.** Full Name (Last, First, Middle Initial)  
BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE State FL Zip Code 32935

Purpose of Disbursement  
pac contribution

Candidate Name  
BILL NELSON FOR U S SENATE

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: FL District: 00

Transaction ID: SB23.29294  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE State FL Zip Code 32935

Purpose of Disbursement  
earmarks-see memo txt

Candidate Name  
BILL NELSON FOR U S SENATE

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: FL District: 00

Transaction ID: SB23.29295  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

City SAVANNAH State GA Zip Code 31402

Purpose of Disbursement  
earmark-mort fridman

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: GA District: 01

Transaction ID: SB23.29284  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

B. Form/Schedule : **SB23**

Transaction ID : **SB23.29295**

gottesman \$500; richard schlussel \$100; abe kramer \$500; howard baruch \$750; esther hershenbaum \$2,500; george klaffer \$500; david flamholz \$500; jerry lewkowitz \$500; leon kozak \$2,500; jerry gontownik \$500.

**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)

<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.

Full Name (Last, First, Middle Initial)  
JON TESTER

Transaction ID: SB23.29266  
Date of Disbursement

Mailing Address 709 SON LANE

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

City State Zip Code  
BIG SANDY MT 59520

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
earmark-jeff hochberg

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MT District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
JON TESTER

Transaction ID: SB23.29268  
Date of Disbursement

Mailing Address 709 SON LANE

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

City State Zip Code  
BIG SANDY MT 59520

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
earmark-jason muss

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MT District: 00

Disbursement For:  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ..... ►

1500.00
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TOTAL This Period (last page this line number only) ..... ►

46259.00
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# 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)

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

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Harvey Paretzky  Mailing Address 7 Fairhill Road  City Edison State NJ Zip Code 08817  Purpose of Disbursement mission registration refund 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: SB28A.29242 Date of Disbursement 03 / 07 / 2011  Amount of Each Disbursement this Period 250.00  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Weiss  Mailing Address 25 Cederhurst Ave.  City Lawrence State NY Zip Code 11575  Purpose of Disbursement mission registration refund 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: SB28A.29251 Date of Disbursement 03 / 25 / 2011  Amount of Each Disbursement this Period 325.00  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Eugene Wolfson  Mailing Address 3840 Greystone Av  City Bronx State NY Zip Code 10463  Purpose of Disbursement mission registration refund 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: SB28A.29244 Date of Disbursement 03 / 11 / 2011  Amount of Each Disbursement this Period 550.00  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1125.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1125.00