

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Suite 111  
 Check if different than previously reported. (ACC)     
CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼  3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  10 / 01 / 2018 through  12 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Davidson, Nathan, , ,  
Type or Print Name of Treasurer \_\_\_\_\_  
Signature of Treasurer Davidson, Nathan, , , [Electronically Filed] Date  01 / 29 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**PEZZULLO FOR SENATOR**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	250.00	950.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	250.00	950.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	6410.15	1638.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6410.15	1638.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1078.83	
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).....	22000.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**PEZZULLO FOR SENATOR**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	250.00	500.00
(ii) Unitemized.....	0.00	450.00
(iii) TOTAL of contributions from individuals ▶	250.00	950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	250.00	950.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	7000.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	7000.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	7250.00	950.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6410.15	1638.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	6410.15	1638.40

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	238.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7250.00
25. SUBTOTAL (add Line 23 and Line 24).....	7488.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6410.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1078.83

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 5 OF 9		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**PEZZULLO FOR SENATOR**

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

Mailing Address 1850 South Ocean Drive

City Hallandale	State FL	Zip Code 33009
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FEC ID number of contributing federal political committee. **C**

Name of Employer Soape Creative	Occupation General manager
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 05 / 2018

**Transaction ID : SA11AI.4173**

Amount of Each Receipt this Period  
250.00

Memo Item  
Credit card Donation

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	250.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 9  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**PEZZULLO FOR SENATOR**

**A.** Full Name (Last, First, Middle Initial)  
**PEZZULLO, RICHARD J, , ,**

Mailing Address **360 STONE HILL ROAD**

City **FREEHOLD** State **NJ** Zip Code **07728**

FEC ID number of contributing federal political committee. **C S4NJ00169**

Name of Employer **Millennium Business Services** Occupation **HIPAA Consultant**

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA13A.4172**

Amount of Each Receipt this Period

Memo Item  
 Loan to Cover Expenses

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="7000.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**PEZZULLO FOR SENATOR**

Full Name (Last, First, Middle Initial) <b>A. Federal Election Commission</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2018		
Mailing Address P.O. Box 979058			FEC Identification Number C		
City St. Louis	State MO	Zip Code 63197	Amount of Each Disbursement this Period 6012.00		
Purpose of Disbursement PUSB03183049293170		Category/ Type 001	Transaction ID : SB17.4175		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Flagship Merchant Svcs</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2018		
Mailing Address PO Box 3429			FEC Identification Number C		
City Thousand Oaks	State CA	Zip Code 91539	Amount of Each Disbursement this Period 219.95		
Purpose of Disbursement Gateway Fees		Category/ Type 001	Transaction ID : SB17.4180		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6231.95
<b>TOTAL</b> This Period (last page this line number only).....▶	6231.95

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4147**  
**PEZZULLO FOR SENATOR**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) PEZZULLO, RICHARD J, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 360 STONE HILL ROAD			
City FREEHOLD	State NJ	ZIP Code 07728	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 115000.00	Cumulative Payment To Date 100000.00	Balance Outstanding at Close of This Period 15000.00
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<b>TERMS</b>	Date Incurred M 06 / D 30 / Y 2018	Date Due M M / D D / Y 12/31/2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	15000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4172**  
**PEZZULLO FOR SENATOR**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) PEZZULLO, RICHARD J, , ,		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 360 STONE HILL ROAD			
City FREEHOLD	State NJ	ZIP Code 07728	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 7000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 7000.00
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<b>TERMS</b>	Date Incurred M 10 / D 23 / Y 2018	Date Due M M / D D / Y 12/2019	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	7000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	22000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.