



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

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

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

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

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

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 135

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

**III. CASH SUMMARY**

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

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

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

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

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

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

Mailing Address 15 West Front St

City State Zip Code  
Trenton NJ 08608

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8826**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

Mailing Address 59 Woodland Ave

City State Zip Code  
East Orange NJ 07017

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

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

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8826.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

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

Mailing Address 200 High St

City State Zip Code  
Mt. Holly NJ 08060

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

Name of Employer Occupation  
Alaimo Group President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8913**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address 201 West End Ave

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Alberto & Associates Occupation Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8916**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 74 Lyman Ave

City Woodbury State NJ Zip Code 08096

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

Name of Employer Ray Angelini, Inc. Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9160**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 51 Cragwood Rd

City South Plainfield State NJ Zip Code 07080

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.8940**

Amount of Each Receipt this Period  
2600.00

Memo Item  
Partnership Contribution

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

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

5600.00

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

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

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

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

Mailing Address 971 East 24th St

City State Zip Code  
Brooklyn NY 11210

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

Name of Employer Occupation  
AristaCare Health Services LLC Managing Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

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

**Transaction ID : SA11AI.8940.0**

Amount of Each Receipt this Period  
2600.00

Memo Item  
Partner Share

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

Mailing Address 505 South Lenola Rd

City State Zip Code  
Moorestown NJ 08057

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

Name of Employer Occupation  
Jersey Outdoor Media, LLC Executive VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9082**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
13820.00

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

**Transaction ID : SA11AI.9082.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Conduit Contribution

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 204 Harding Ave

City State Zip Code  
Bellmawr NJ 08031

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.8947**

Amount of Each Receipt this Period  
750.00

Memo Item  
Partnership Contribution

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

Mailing Address 204 Harding Ave

City State Zip Code  
Bellmawr NJ 08031

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

Name of Employer Occupation  
DeIVal Realty Group, LLC Member / Real Estate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.8947.0**

Amount of Each Receipt this Period  
750.00

Memo Item  
Partner Share

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

Mailing Address 71 West Park Ave

City State Zip Code  
Vineland NJ 08360

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8959**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

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

2250.00



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

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

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

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

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

Mailing Address 71 West Park Ave

City Vineland State NJ Zip Code 08360

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

Name of Employer B&S Partnership Occupation Executive / Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8959.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

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

Mailing Address 806 Station Ave

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Bach Associates, PC Occupation Engineer/Architect

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.8942**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 500 S. Kings Hwy

City Cherry Hill State NJ Zip Code 08034

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.8951**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

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

3000.00

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Ivan J Becica**

Mailing Address 500 S. Kings Hwy

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Becica Associates, LLC Engineer/Managing Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
729.17

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

**Transaction ID : SA11AI.8951.0**

Amount of Each Receipt this Period  
562.50

Memo Item  
Partner Share

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

Mailing Address 500 S. Kings Hwy

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Becica Associates, LLC Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
729.16

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

**Transaction ID : SA11AI.8951.1**

Amount of Each Receipt this Period  
562.50

Memo Item  
Partner Share

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

Mailing Address 500 S. Kings Hwy

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Becica Associates, LLC Member

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
541.67

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

**Transaction ID : SA11AI.8951.2**

Amount of Each Receipt this Period  
375.00

Memo Item  
Partner Share

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

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

0.00

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

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

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

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

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

Mailing Address 119 Akron Ave

City Haddon Twp      State NJ      Zip Code 08108

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

Name of Employer Bellia Office Furniture      Occupation President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

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

**Transaction ID : SA11AI.8944**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

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

Mailing Address 2312 Fernwood Ave

City Atco      State NJ      Zip Code 08004

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

Name of Employer N/A      Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 450.00

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

**Transaction ID : SA11AI.9031**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

Memo Item

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

Mailing Address 260 Ridings Way

City Ambler      State PA      Zip Code 19002

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

Name of Employer Ragone Lacatena Fairchild Bepp      Occupation CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2500.00

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

**Transaction ID : SA11AI.9159**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

Memo Item

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

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

\_\_\_\_\_ 3250.00

\_\_\_\_\_

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

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

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

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

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

Mailing Address 66 Manor House Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Barb's Harley Davidson Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.8943**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 132 Kings Hwy E

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9206**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

Mailing Address 515 Westminster Ave

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
BRE Presents LLC President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9206.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

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

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

3000.00

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

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

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

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

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

Mailing Address 5601 Atlantic Ave

City State Zip Code  
 Ventnor NJ 08406

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

Name of Employer Occupation  
 Calvi Electric Company Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 4700.00

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

**Transaction ID : SA11AI.8983**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 5601 Atlantic Ave

City State Zip Code  
 Ventnor NJ 08406

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

Name of Employer Occupation  
 Calvi Electric Company Contractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5000.00

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

**Transaction ID : SA11AI.8984**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 360 Haddon Ave  
 PO Box 539

City State Zip Code  
 Westmont NJ 08108

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.8976**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

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

4500.00

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

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

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

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

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

Mailing Address 360 Haddon Ave  
 PO Box 539

City State Zip Code  
 Westmont NJ 08108

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.8976.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

Mailing Address 1515 Burnt Mill Rd

City State Zip Code  
 Cherry Hill NJ 08003

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

Name of Employer Occupation  
 The Four B's Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.9181**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 1655 US Hwy 9

City State Zip Code  
 Old Bridge NJ 08857

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

Name of Employer Occupation  
 Brunetti Organization Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.8978**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address 120 Forest Dr

City State Zip Code  
Hammonton NJ 08037

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8936**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 101 Hun Rd

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Byrne Asset Management Investments

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

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

**Transaction ID : SA11AI.8979**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 406 Sawyers Lane

City State Zip Code  
Newtown PA 18940

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

Name of Employer Occupation  
Cairone & Kaupp Landscape Architect

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.8982**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 16 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 504 Jefferson Ave

City Avon By The Sea State NJ Zip Code 07717

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

Name of Employer French & Parrello Occupation Consulting Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9055**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
15320.00

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

**Transaction ID : SA11AI.9055.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Conduit Contribution

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

Mailing Address 601A White Horse Pike

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.8985**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 17 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 316 Chews Landing Rd

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Archer & Greiner Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8934**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 231 Hopkins Rd

City Mickleton State NJ Zip Code 08056

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

Name of Employer Bowman & Co, LLP Occupation CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1200.00

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

**Transaction ID : SA11AI.8957**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 100 Route 73 North

City Palmyra State NJ Zip Code 08065

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9036**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

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

2800.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 18 OF 135

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

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

Mailing Address 100 Route 73 North

City Palmyra State NJ Zip Code 08065

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

Name of Employer Occupation  
 FC Kerbeck / CGF Associates President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

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

**Transaction ID : SA11AI.9036.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

Mailing Address 81 Westminster Dr

City Voorhees State NJ Zip Code 08043

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

Name of Employer Occupation  
 T&M Associates Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.9148**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 170 Sugarberry Dr

City New Castle State DE Zip Code 19720

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

Name of Employer Occupation  
 Aviman Management Construction

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.8921**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

2000.00

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

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FOR LINE NUMBER: PAGE 19 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 183 E. Main St

City Rochester State NY Zip Code 14604

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9003**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

Mailing Address 183 E. Main St

City Rochester State NY Zip Code 14604

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

Name of Employer Occupation  
 Conifer Realty, LLC Partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9003.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

Mailing Address 403 Pleasant Valley Ave

City Moorestown State NJ Zip Code 08057

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

Name of Employer Occupation  
 SJ Mechanical Contractors Assn Director

Receipt For: 2015  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9290**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address **PO Box 807**

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

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9001**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

Mailing Address **205 S Marion Ave**

City **Wenonah** State **NJ** Zip Code **08090**

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

Name of Employer **Cornell & Co** Occupation **PR Director**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9002**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

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

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

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9124**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
 Partnership Contribution

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

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

**4500.00**

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 21 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

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

Mailing Address 75 Livingston Ave

City Roseland State NJ Zip Code 07068

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

Name of Employer Critchley, Kinum & Vazquez LLC Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

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

**Transaction ID : SA11AI.9124.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
Partner Share

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

Mailing Address 37 Elkington Rd

City Mt Laurel State NJ Zip Code 08054

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

Name of Employer Phoenix Strategies Occupation Managing Director

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

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

**Transaction ID : SA11AI.9014**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 24070.00

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

**Transaction ID : SA11AI.9014.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
Conduit Contribution

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 22 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 210 Casperson St

City State Zip Code  
Gibbstown NJ 08027

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

Name of Employer Occupation  
Foundation Title Title Insurance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9054**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Miriam D'Andrea**

Mailing Address 172 Trellis Ln

City State Zip Code  
Sewell NJ 08080

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9007**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address PO Box 501

City State Zip Code  
Allenwood NJ 08720

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

Name of Employer Occupation  
T&M Associates CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9178**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 23 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Gerald E Darling**

Mailing Address 120 Somers Ct South

City Moorestown State NJ Zip Code 08057

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

Name of Employer Archer & Greiner Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8932**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 117 Spyglass Dr

City Blue Bell State PA Zip Code 19422

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

Name of Employer Archer & Greiner Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8937**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 500 Frank W Burr Blvd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9028**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

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

2100.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.9028

No Itemizable Partner Share

Form/Schedule:

Transaction ID:



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

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

FOR LINE NUMBER: PAGE 25 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 200 Campbell Dr  
Ste 200

City Willingboro State NJ Zip Code 08046

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9198**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

Mailing Address 200 Campbell Dr  
Suite 200

City Willingboro State NJ Zip Code 08046

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

Name of Employer Occupation  
 Delco Development Developer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9198.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

Mailing Address PO Box 354

City Moorestown State NJ Zip Code 08057

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

Name of Employer Occupation  
 CMSI, LLC Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9012**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 118 S 18th Ave

City Longport State NJ Zip Code 08403

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

Name of Employer N/A Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9022**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 1500 Market St Suite 3500E

City Philadelphia State PA Zip Code 19102

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9027**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

Mailing Address 440 S Broad St PH2

City Philadelphia State PA Zip Code 19146

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

Name of Employer Dranoff Properties Inc. Occupation Developer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9026**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4500.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.9027

No Itemizable Partner Share

Form/Schedule:

Transaction ID:

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 28 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Peter E Driscoll</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address Birdwood House<br>Hopkins Ln<br>City State Zip Code<br>Haddonfield NJ 08033   |  | <b>Transaction ID : SA11AI.8935</b>                          |  |
| FEC ID number of contributing federal political committee. C  |  | Amount of Each Receipt this Period<br>300.00                 |  |
| Name of Employer Occupation<br>Archer & Greiner Attorney  |  | <input type="checkbox"/> Memo Item                           |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  | Election Cycle-to-Date<br>500.00                             |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Dennis J Enright</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 136 Terrace Ave<br>City State Zip Code<br>Jersey City NJ 07307  |  | <b>Transaction ID : SA11AI.9147</b>                          |  |
| FEC ID number of contributing federal political committee. C  |  | Amount of Each Receipt this Period<br>1500.00                |  |
| Name of Employer Occupation<br>NW Financial Investment Banker   |  | <input type="checkbox"/> Memo Item                           |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  | Election Cycle-to-Date<br>2350.00                            |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Daniel Falasca</b>   |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 5496 E Chestnut Ave<br>City State Zip Code<br>Vineland NJ 08360   |  | <b>Transaction ID : SA11AI.9035</b>                          |  |
| FEC ID number of contributing federal political committee. C  |  | Amount of Each Receipt this Period<br>1500.00                |  |
| Name of Employer Occupation<br>Falasca Mechanical, Inc. Mechanical Contractor   |  | <input type="checkbox"/> Memo Item                           |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  | Election Cycle-to-Date<br>2500.00                            |  |

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

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 29 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Daniel Fee</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 2636 Brown St   |                                  | <b>Transaction ID : SA11AI.9182</b>                          |  |
| City Philadelphia   | State PA                         | Amount of Each Receipt this Period<br>500.00                 |  |
| Zip Code 19130  |                                  | <input type="checkbox"/> Memo Item<br>Earmarked Contribution |  |
| FEC ID number of contributing federal political committee. C  |                                  |  |  |
| Name of Employer<br>The Echo Group  | Occupation<br>Consultant         |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |                                    |   |  |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ACTBLUE</b>  |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015          |  |
| Mailing Address P.O. BOX 441146   |                                    | <b>Transaction ID : SA11AI.9182.0</b>                                 |  |
| City SOMERVILLE   | State MA                           | Amount of Each Receipt this Period<br>500.00                          |  |
| Zip Code 02144  |                                    | <input checked="" type="checkbox"/> Memo Item<br>Conduit Contribution |  |
| FEC ID number of contributing federal political committee. C C00401224  |                                    |   |  |
| Name of Employer  |                                    | Occupation  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>21320.00 |   |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Matthew J Finnegan MD</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 31 / 2015 |  |
| Mailing Address 200 Chews Landing Rd  |                                   | <b>Transaction ID : SA11AI.9119</b>                          |  |
| City Haddonfield  | State NJ                          | Amount of Each Receipt this Period<br>1500.00                |  |
| Zip Code 08033  |                                   | <input type="checkbox"/> Memo Item                           |  |
| FEC ID number of contributing federal political committee. C  |                                   |  |  |
| Name of Employer<br>Lourdes Health  |                                   | Occupation<br>Physician                                      |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

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

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

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

Mailing Address 2135 Green St

City Philadelphia State PA Zip Code 19145

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

Name of Employer Concord Asset Mgmt LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3300.00**

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

**Transaction ID : SA11AI.8995**

Amount of Each Receipt this Period  
**1300.00**

Memo Item

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

Mailing Address 2135 Green St

City Philadelphia State PA Zip Code 19145

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

Name of Employer Concord Asset Mgmt LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11AI.8996**

Amount of Each Receipt this Period  
**1700.00**

Memo Item

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

Mailing Address 218 Broubalow Way

City Phillipsburg State NJ Zip Code 08865

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9044**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
 Partnership Contribution

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

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

**4500.00**

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 31 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

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

Mailing Address 2351 Washington Ln

City State Zip Code  
Bethlehem PA 18015

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

Name of Employer Occupation  
Florio Perrucci et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.9044.0**

Amount of Each Receipt this Period  
750.00

Memo Item  
Partner Share

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

Mailing Address 218 Rt 17 N  
Suite 300

City State Zip Code  
Rochelle Park NJ 07662

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

Name of Employer Occupation  
Florio Perrucci et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

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

**Transaction ID : SA11AI.9044.1**

Amount of Each Receipt this Period  
750.00

Memo Item  
Partner Share

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

Mailing Address 1141 Winding Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
N/A Unemployed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9038**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

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

2700.00

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

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

FOR LINE NUMBER: PAGE 32 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 1141 Winding Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
N/A Unemployed

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11AI.9039**

Amount of Each Receipt this Period  
 2300.00

Memo Item

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

Mailing Address 1141 Winding Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Forman Mills CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9040**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 1141 Winding Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Forman Mills CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11AI.9041**

Amount of Each Receipt this Period  
 2300.00

Memo Item

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

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

7300.00



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

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

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

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Charles Foulke</b>   |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 18 / 2015 |  |
| Mailing Address 800 Springdale Rd   |   | <b>Transaction ID : SA11AI.8987</b>                          |  |
| City<br>Cherry Hill   | State<br>NJ                             | Zip Code<br>08003  |  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>_____ 700.00           |  |
| Name of Employer<br>Cherry Hill Triplex   | Occupation<br>President                 |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>_____ 2700.00 |  |  |

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

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

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

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Terence J Fox**

Mailing Address 1132 Parliament Way

City State Zip Code  
Thorofare NJ 08086

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8938**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 102 Simi Ct

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Diener Brick Co VP Sales

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9021**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 433 Chairville Rd

City State Zip Code  
Vincetown NJ 08088

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9058**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Earmarked Contribution

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

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

3300.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 35 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 18320.00

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

**Transaction ID : SA11AI.9058.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Conduit Contribution

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

Mailing Address 1640 Pennfield Dr

City Thorofare State NJ Zip Code 08086

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

Name of Employer Occupation  
 Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

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

**Transaction ID : SA11AI.8924**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 1 Harrowgate Dr

City Cherry Hill State NJ Zip Code 08003

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

Name of Employer Occupation  
 Archer & Greiner Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

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

**Transaction ID : SA11AI.8931**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

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

600.00

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

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

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

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

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

Mailing Address 2 Aquarium Dr  
Ste 320

City Camden State NJ Zip Code 08103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9202**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

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

Mailing Address 143B North 22nd St

City Philadelphia State PA Zip Code 19132

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

Name of Employer Occupation  
Group Melvin Design, LLC Professional Planner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9202.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

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

Mailing Address 841 Merion Sq Rd

City Gladwyne State PA Zip Code 19035

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

Name of Employer Occupation  
CSMI, LLC CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9013**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address 7201 Wayne Ave

City Philadelphia State PA Zip Code 19119

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

Name of Employer Liberty Property Trust Occupation Chariman & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9098**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 146 Peach Rd

City Bellmawr State NJ Zip Code 08031

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

Name of Employer Law Offices of Lynda Hinkle Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9111**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 44 Euclid St

City Woodbury State NJ Zip Code 08096

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

Name of Employer Holmes & Co, LLC Occupation CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.9289**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

3500.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 38 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

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

Mailing Address **PO Box 69**

City **Gloucester City** State **NJ** Zip Code **08030**

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

Name of Employer **Holt Logistics Corp** Occupation **Executive**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9068**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

Mailing Address **19 Merganser Ct**

City **Glassboro** State **NJ** Zip Code **08028**

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

Name of Employer **N/A** Occupation **Homemaker**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.8925**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

Mailing Address **20 Valley View Terr**

City **Moorestown** State **NJ** Zip Code **08057**

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

Name of Employer **Taylor Wiseman Taylor** Occupation **Engineer**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9179**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

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

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

**4500.00**

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

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

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

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

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

Mailing Address 20 Royal Dominion Ct

City State Zip Code  
 Bethesda MD 20817

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

Name of Employer Occupation  
 Hutton Strategies Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

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

**Transaction ID : SA11AI.9163**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 112 Canterbury Dr

City State Zip Code  
 Ramsey NJ 07446

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

Name of Employer Occupation  
 Inserra Supermarkets, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 500.00

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

**Transaction ID : SA11AI.9070**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 7 S Lanning Ave

City State Zip Code  
 Hopewell NJ 08525

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

Name of Employer Occupation  
 Rosemont Assoc LLC Senior Vice President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 750.00

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

**Transaction ID : SA11AI.9170**

Amount of Each Receipt this Period  
 750.00

Memo Item

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 40 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 985 Oak Crest Lane

City State Zip Code  
Media PA 19063

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

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

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.9071**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 52 Maidenhead Rd

City State Zip Code  
Princeton NJ 08540

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

Name of Employer Occupation  
Kaufman Zita Group Lobbyist/Government Relations

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9094**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 214 Jefferson Ave

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
Kearney & Associates Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9095**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

2500.00



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

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

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

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

Mailing Address 339 Alhambra Pl

City State Zip Code  
West Palm Beach FL 33405

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

Name of Employer Occupation  
Kennedy Managment & Consulting Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9078**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 124 Washington St #101

City State Zip Code  
Foxboro MA 02035

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

Name of Employer Occupation  
The Kennedy Forum Founder

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9042**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 425 Lakeview Ave

City State Zip Code  
Haddonfield NJ 08033

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

Name of Employer Occupation  
Surety Title President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8968**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 42 OF 135

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

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

Mailing Address 36 Vaughn Ave

City State Zip Code  
 Bellmawr NJ 08031

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

Name of Employer Occupation  
 Lighthouse Development Group President / Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

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

**Transaction ID : SA11AI.9100**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 1913 Greentree Rd  
 Ste C

City State Zip Code  
 Cherry Hill NJ 08003

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

Name of Employer Occupation  
 Law Offices Of Adam M. Kotlar Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.9103**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 21 Kilmer Dr  
 Bldg 2, Ste E

City State Zip Code  
 Morganville NJ 07751

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

Name of Employer Occupation  
 EK Consulting Services LLC Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1500.00

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

**Transaction ID : SA11AI.9029**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

3500.00

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

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

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

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

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

Mailing Address 3257 O Street  
NW

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9016**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 3257 O Street  
NW

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

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

**Transaction ID : SA11AI.9018**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 107 S Argyle Ave

City Margate City State NJ Zip Code 08402

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

Name of Employer Cooper Levenson Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9000**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

6900.00

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

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

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

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

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

Mailing Address 6 Trefoil Terrace

City State Zip Code  
Mount Laurel NJ 08054

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Conner Strong Buckelew Insurance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9281**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1 Blakely Rd

City State Zip Code  
Haverford PA 19041

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9074**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 553 W Oak Rd

City State Zip Code  
Vineland NJ 08360

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Louis N Magazzu, LLC Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9110**

Amount of Each Receipt this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 45 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address PO Box 20

City State Zip Code  
Milmay NJ 08340

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

Name of Employer Occupation  
Charles Marandino LLC Concrete Contractor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

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

**Transaction ID : SA11AI.9114**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 185 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation  
Title America Agency Corp Title Insurance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9117**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 191 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9115**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

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

3300.00

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

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

FOR LINE NUMBER: PAGE 46 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 191 W White Horse Pike

City State Zip Code  
Berlin NJ 08009

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

Name of Employer Occupation  
Maressa Patterson, LLC Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9115.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

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

Mailing Address 150 Westover Dr

City State Zip Code  
Delran NJ 08075

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

Name of Employer Occupation  
Moorestown Field Club Assistant Superintendent

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9057**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 5207 Bishops View Cir

City State Zip Code  
Cherry Hill NJ 08002

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

Name of Employer Occupation  
McKernan McKernan Godino Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9118**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address 3 Surrey Dr

City State Zip Code  
Newtown Square PA 19073

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

Name of Employer Occupation  
Pennoni Associates CPA

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8927**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 402 Newbold Rd

City State Zip Code  
Jenkintown PA 19046

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

Name of Employer Occupation  
Utility Line Service, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4300.00

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

**Transaction ID : SA11AI.9188**

Amount of Each Receipt this Period  
1300.00

Memo Item

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

Mailing Address 402 Newbold Rd

City State Zip Code  
Jenkintown PA 19046

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

Name of Employer Occupation  
Utility Line Service, Inc. President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

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

**Transaction ID : SA11AI.9189**

Amount of Each Receipt this Period  
200.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 48 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A. Miller-Remick LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 Kings Hwy South  
 FI 1  
 City State Zip Code  
 Cherry Hill NJ 08034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015  
**Transaction ID : SA11AI.9126**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 Partnership Contribution

**B. Frank Remick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 Kings Hwy South  
 FI 1  
 City State Zip Code  
 Cherry Hill NJ 08034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Miller-Remick LLC Principal  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015  
**Transaction ID : SA11AI.9126.0**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 Partner Share

**C. Louis R Moffa Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Farmington Rc  
 City State Zip Code  
 Cherry Hill NJ 08024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Montgomery McCracken Attorney  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015  
**Transaction ID : SA11AI.9123**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

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

2000.00



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

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

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

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

Mailing Address 112 Nantucket Dr

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8993**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 252 Strawbridge Ave

City State Zip Code  
Collingswood NJ 08108

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

Name of Employer Occupation  
Flying Fish Brewing Co President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.9047**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
19320.00

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

**Transaction ID : SA11AI.9047.0**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Conduit Contribution

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 50 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address R.D.1, 5 Treetop Lane

City State Zip Code  
Westampton NJ 08060

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

Name of Employer Occupation  
Alaimo Group Senior Associate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8914**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 45 Blossom Cove Rd

City State Zip Code  
Red Bank NJ 07701

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

Name of Employer Occupation  
Murphy Endeavors Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.8920**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 6 Brookview Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Conner Strong Buckelew CFO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8998**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

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

3000.00

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

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

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

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9139**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

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

**Transaction ID : SA11AI.9141**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

City State Zip Code  
Marlton NJ 08053

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

Name of Employer Occupation  
Conner Strong & Buckelew Executive Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9134**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

8100.00

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

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 52 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. George E Norcross III</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 401 Rt 73 North, Suite 300<br>40 Lake Ctr Exec Pk   |   | <b>Transaction ID : SA11AI.9135</b>                          |  |
| City Marilton State NJ Zip Code 08053   | Amount of Each Receipt this Period<br>_____ 2700.00 |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   | <input type="checkbox"/> Memo Item                  |  |  |
| Name of Employer Conner Strong & Buckelew Occupation Executive Chairman   | Election Cycle-to-Date<br>_____ 5400.00             |  |  |
| Receipt For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. John C Norcross PhD</b>  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2015 |  |
| Mailing Address 1013 Fairfield Circle   |  | <b>Transaction ID : SA11AI.9089</b>                          |  |
| City Clarks Summit State PA Zip Code 18411  | Amount of Each Receipt this Period<br>_____ 1500.00          |  |  |
| FEC ID number of contributing federal political committee. <b>C</b>   | <input type="checkbox"/> Memo Item<br>Earmarked Contribution |  |  |
| Name of Employer University of Scranton Occupation Professor/Psychologist   | Election Cycle-to-Date<br>_____ 1500.00                      |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |  |  |

|   |   |  |  |
|---|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ACTBLUE</b>  |   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 07 / 2015 |  |
| Mailing Address P.O. BOX 441146   |   | <b>Transaction ID : SA11AI.9089.0</b>                        |  |
| City SOMERVILLE State MA Zip Code 02144   | Amount of Each Receipt this Period<br>_____ 1500.00                   |  |  |
| FEC ID number of contributing federal political committee. <b>C</b> C00401224   | <input checked="" type="checkbox"/> Memo Item<br>Conduit Contribution |  |  |
| Name of Employer Occupation   | Election Cycle-to-Date<br>_____ 16820.00                              |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |  |

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

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

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

FOR LINE NUMBER: PAGE 53 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Parker McCay Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9142**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 2 Yearling Chase

City State Zip Code  
Mt Laurel NJ 08054

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

Name of Employer Occupation  
Parker McCay Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

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

**Transaction ID : SA11AI.9144**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

City State Zip Code  
Marlton NJ 08053

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.9136**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

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

8100.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 54 OF 135

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

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

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

City Marilton State NJ Zip Code 08053

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5400.00

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

**Transaction ID : SA11AI.9137**

Amount of Each Receipt this Period  
 2700.00

Memo Item

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

Mailing Address 53 Maple Ave

City Morristown State NJ Zip Code 07960

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

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

**Transaction ID : SA11AI.9145**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

Mailing Address 1776 On the Green  
 67 Park Place

City Morristown State NJ Zip Code 07960

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

Name of Employer Normandy FW, LLC Occupation Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

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

**Transaction ID : SA11AI.9145.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

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

4200.00

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

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

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

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

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

Mailing Address 251 New Rd

City State Zip Code  
Marlton NJ 08053

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Unique Industries, Inc. President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9034**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 245 Auburn Rd

City State Zip Code  
Pilesgrove NJ 08098

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CPS Distribution Services CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9010**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 245 Auburn Rd

City State Zip Code  
Pilesgrove NJ 08098

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CPS Distribution Services CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.9011**

Amount of Each Receipt this Period

Memo Item

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

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

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 56 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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

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

Mailing Address 1617 JFK Blvd, 19th Fl

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

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

**Transaction ID : SA11AI.9157**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partnership Contribution

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

Mailing Address 1671 JFK Blvd  
19th Fl

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation  
Obermayer Rebmann et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.9157.0**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 Partner Share

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

Mailing Address 117 Augusta Dr

City Moorestown State NJ Zip Code 08057

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

Name of Employer Occupation  
Continuum Health Alliance Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11AI.8991**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

**3000.00**



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

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

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

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

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

Mailing Address 401 Willow Ln

City Southampton State NJ Zip Code 08088

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

Name of Employer Lymar Builder Occupation General Contractor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9112**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 942 Black Rock Rd

City Gladwyne State PA Zip Code 19035

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

Name of Employer P Agnes Construction Occupation Principal / Vice President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9149**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 4055 Gnarled Oaks Ln

City Johns Island State SC Zip Code 29455

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9023**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 58 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 21 West High St

City State Zip Code  
Glassboro NJ 08028

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

Name of Employer Occupation  
Petroni & Associates CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9152**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 8601 Thomas Mill Terr

City State Zip Code  
Philadelphia PA 19128

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8989**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 151 Renaissance Dr

City State Zip Code  
Cherry Hill NJ 08003

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

Name of Employer Occupation  
Platt Memorial Chapels Funeral Director

Receipt For: 2015  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.8955**

Amount of Each Receipt this Period  
 250.00

Memo Item

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

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

3250.00

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

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

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

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

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

Mailing Address 8 Hazelhurst Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Platt & Riso PC Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : SA11AI.9174**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 228 Grove St

City State Zip Code  
Montclair NJ 07042

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

Name of Employer Occupation  
Global Strategy Group Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9156**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 27 Corshan Rd

City State Zip Code  
Medford NJ 08055

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

Name of Employer Occupation  
Alaimo Group Senior Associate

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8912**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

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

4500.00

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

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

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

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

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

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

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

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

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

FOR LINE NUMBER: PAGE 61 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Joseph J Raday**

Mailing Address 1646 Silver Birch Rd

City State Zip Code  
Williamstown NJ 08094

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

Name of Employer Occupation  
Self - RWD Consultants, LLC Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

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

**Transaction ID : SA11AI.8909**

Amount of Each Receipt this Period  
2700.00

Memo Item

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

Mailing Address 1646 Silver Birch Rd

City State Zip Code  
Williamstown NJ 08094

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

Name of Employer Occupation  
Self - RWD Consultants, LLC Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

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

**Transaction ID : SA11AI.8910**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 600 Kings Hwy North

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Supermarkets of Cherry Hill Executive

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11AI.9177**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4500.00

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

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

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

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Craig Remington</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 6 Washington Ave  |                                   | <b>Transaction ID : SA11AI.9161</b>                          |  |
| City<br>Haddonfield   | State<br>NJ                       | Zip Code<br>08033  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1500.00                |  |
| Name of Employer<br>Remington & Vernick   | Occupation<br>Engineer            |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00 |  |  |

|   |                                  |  |  |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Edward G Rendell</b>   |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 08 / 2015 |  |
| Mailing Address 200 South Broad St<br>Ste 420   |                                  | <b>Transaction ID : SA11AI.9063</b>                          |  |
| City<br>Philadelphia  | State<br>PA                      | Zip Code<br>19102  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00                 |  |
| Name of Employer<br>Ballard Spahr   | Occupation<br>Attorney           |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |  |

|   |                                   |  |  |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Harry F Renwick Jr.</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 100 S Lippincott Ave  |                                   | <b>Transaction ID : SA11AI.9162</b>                          |  |
| City<br>Maple Shade   | State<br>NJ                       | Zip Code<br>08052  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1500.00                |  |
| Name of Employer<br>Renwick & Associates  | Occupation<br>President           |  |  |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1500.00 |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____   |

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

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

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

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

Mailing Address 6793 Father John Ct

City McLean State VA Zip Code 22101

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.9079**

Amount of Each Receipt this Period  
500.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
24570.00

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

**Transaction ID : SA11AI.9079.0**

Amount of Each Receipt this Period  
500.00

Memo Item  
Conduit Contribution

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

Mailing Address 404 Loucroft Rd

City Haddonfield State NJ Zip Code 08033

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

Name of Employer Cahill Wilinski Rhodes & Joyce Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8980**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

2000.00

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

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

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

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

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

Mailing Address 19 Ashbrooke Dr

City State Zip Code  
Voorhees NJ 08043

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

Name of Employer Occupation  
Tars & Stripes Managing Member

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.8922**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 401 Addison Ave

City State Zip Code  
Westmont NJ 08108

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

Name of Employer Occupation  
Artist Point President

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9165**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 2516 Delancey St

City State Zip Code  
Philadelphia PA 19103

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

Name of Employer Occupation  
Archer & Greiner Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8933**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

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

3300.00



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

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

FOR LINE NUMBER: PAGE 65 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 116 Westover Dr

City State Zip Code  
Cherry Hill NJ 08034

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.9166**

Amount of Each Receipt this Period  
500.00

Memo Item  
Earmarked Contribution

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

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
22570.00

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

**Transaction ID : SA11AI.9166.0**

Amount of Each Receipt this Period  
500.00

Memo Item  
Conduit Contribution

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

Mailing Address 49 Bryce's Ct

City State Zip Code  
Sicklerville NJ 08081

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

Name of Employer Occupation  
Bowman & Co, LLP CPA

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1400.00

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

**Transaction ID : SA11AI.8958**

Amount of Each Receipt this Period  
1200.00

Memo Item

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

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

1700.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 66 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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

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

Mailing Address 43 Holly Way  
On Clark's Pond

City Bridgeton State NJ Zip Code 08302

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

Name of Employer Salmon Ventures Ltd Occupation Chairman

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

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

**Transaction ID : SA11AI.9172**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 27 Allenby Ln

City Scotch Plains State NJ Zip Code 07076

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

Name of Employer PS&S, LLC Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9150**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 100 Station Ave

City Haddon Heights State NJ Zip Code 08035

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

Name of Employer Archer & Greiner Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : SA11AI.8939**

Amount of Each Receipt this Period  
300.00

Memo Item

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

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

3300.00

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

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 67 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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

**A.** Full Name (Last, First, Middle Initial)  
**Alan F Savitz Esq**

Mailing Address 900 Rt 168  
Suite B3

City Turnersville State NJ Zip Code 08012

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

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : SA11AI.8915**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 717 Main St

City Riverton State NJ Zip Code 08077

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

Name of Employer KMS Development Partners Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : SA11AI.9097**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 1715 Hillcrest Ln

City Aston State PA Zip Code 19014

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

Name of Employer Pennoni Associates Occupation Executive VP

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11AI.9132**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2750.00

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

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

FOR LINE NUMBER: PAGE 68 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Steven M Shriver**

Mailing Address 2 Knoll Ct

City Sewell State NJ Zip Code 08080

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

Name of Employer Consulting Engineer Services Occupation Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.8999**

Amount of Each Receipt this Period  
 1500.00

Memo Item

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

Mailing Address 202 Gomez Rd

City Hobe Sound State FL Zip Code 33455

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

Name of Employer Owner Occupation Singh Real Estate Enterprises

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11AI.9072**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**John S Sitzler**

Mailing Address 1487 Route 38

City Mt Holly State NJ Zip Code 08060

FEC ID number of contributing federal political committee. **C**

Name of Employer Sitzler & Sitzler Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9320**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Some**

Mailing Address 6 Sandpiper Ct

City Skillman State NJ Zip Code 08558

FEC ID number of contributing federal political committee. **C**

Name of Employer MWW Group Occupation Government Affairs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9130**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Stradley, Ronon, Stevens & Young, LLP**

Mailing Address 2005 Market St Suite 2600

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11AI.9175**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

**C.** Full Name (Last, First, Middle Initial)  
**William R Sasso**

Mailing Address 2005 Market St Suite 2600

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Stradley Ronon et al Occupation Chairman

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2015

**Transaction ID : SA11AI.9175.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 70 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Swanson Street Associates**

Mailing Address 350 Sentry Pkwy  
Bldg 630, Ste 300

City Blue Bell State PA Zip Code 19422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9065**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Ken Goldenberg**

Mailing Address 350 Sentry Pkwy  
Bldg 630, Ste 300

City Blue Bell State PA Zip Code 19422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Swanson Street Associates Developer/Partner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9065.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partner Share

**C.** Full Name (Last, First, Middle Initial)  
**Stella Sytnik**

Mailing Address 3 Eastwood Ct

City Voorhees State NJ Zip Code 08043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Camden County College Adjunct Professor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2015

**Transaction ID : SA11AI.9173**

Amount of Each Receipt this Period  
100.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**The Bloom Organization, LLC**

Mailing Address 1300 Rotue 73  
Suite 106

City State Zip Code  
Mt Laurel NJ 08054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8961**

Amount of Each Receipt this Period  
1500.00

Memo Item  
 Partnership Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Frank Martin**

Mailing Address 1300 Route 73  
Suite 106

City State Zip Code  
Mt Laurel NJ 08054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
The Bloom Organziation, LLC Real Estate Management

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.8961.0**

Amount of Each Receipt this Period  
1500.00

Memo Item  
 Partner Share

**C.** Full Name (Last, First, Middle Initial)  
**David B Thompson**

Mailing Address 26 Independence Dr

City State Zip Code  
Bordentown NJ 08505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phoenix Advisors, LLC CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9153**

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Marlene Thompson**

Mailing Address 26 Independence Dr

City State Zip Code  
Bordentown NJ 08505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Phoenix Advisors, LLC Administrative Assistant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.9154**

Amount of Each Receipt this Period  
 300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Michael Tiagwad**

Mailing Address 8 Rockress Way

City State Zip Code  
Mt Laurel NJ 08054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conner Strong Buckelew Insurance

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.9005**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Gregory R Valesi**

Mailing Address 6 Ella Dr

City State Zip Code  
Millstone Twp NJ 08510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CME Associates Professional Engineer

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2015

**Transaction ID : SA11AI.8992**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3300.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |   |                |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 73 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**William Anthony Van Veen**

Mailing Address 30 Tenby Chase

City State Zip Code  
Havertown PA 19083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AVL Digial Group CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11AI.8945**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Wade, Long, Wood & Kennedy, LLC**

Mailing Address 1250 Chews Landing Rd

City State Zip Code  
Laurel Springs NJ 08021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9194**

Amount of Each Receipt this Period  
1500.00

Memo Item  
Partnership Contribution

**C.** Full Name (Last, First, Middle Initial)  
**John D Wade**

Mailing Address 357 Tavistock Dr

City State Zip Code  
Medford NJ 08055

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
562.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9194.0**

Amount of Each Receipt this Period  
562.50

Memo Item  
Partner Share

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Howard C Long**

Mailing Address 23 Promenade Pl

City State Zip Code  
Voorhees NJ 08043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1562.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 15 2015

**Transaction ID : SA11AI.9194.1**

Amount of Each Receipt this Period  
562.50

Memo Item  
Partner Share

**B.** Full Name (Last, First, Middle Initial)  
**Len Wood**

Mailing Address 1205 Chews Landing Rd

City State Zip Code  
Laurel Springs NJ 08021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Wade Long et al Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 15 2015

**Transaction ID : SA11AI.9194.2**

Amount of Each Receipt this Period  
375.00

Memo Item  
Partner Share

**C.** Full Name (Last, First, Middle Initial)  
**Kim Whelan**

Mailing Address 832 Matlack Dr

City State Zip Code  
Moorestown NJ 08057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Acacia Financial Financial Advisor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 15 2015

**Transaction ID : SA11AI.9096**

Amount of Each Receipt this Period  
750.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Noreen P White**

Mailing Address 2 Tuxedo Rd

City State Zip Code  
Glen Ridge NJ 07028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Acacia Financial Financial Advisor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.9101**

Amount of Each Receipt this Period  
750.00

Memo Item  
Earmarked Contribution

**B.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 441146

City State Zip Code  
SOMERVILLE MA 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
22070.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2015

**Transaction ID : SA11AI.9101.0**

Amount of Each Receipt this Period  
750.00

Memo Item  
Conduit Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Francis A Witt**

Mailing Address 414 Delaware Ave

City State Zip Code  
National Park NJ 08063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
McKernan Architects Principal

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9093**

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Tim Yehl**

Mailing Address 228 E Street NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Tim Yehl, LLC Occupation Consultant

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11AI.9184**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**David Glenn Zallie**

Mailing Address 4 Penhale Psge

City Medford State NJ Zip Code 08055

FEC ID number of contributing federal political committee. **C**

Name of Employer Zallie's Supermarkets Occupation Owner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9190**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Raymond J Zane Esq**

Mailing Address 131 Delaware St

City Woobury State NJ Zip Code 08096

FEC ID number of contributing federal political committee. **C**

Name of Employer Zane & Lozuke Occupation Attorney

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2015

**Transaction ID : SA11AI.9019**

Amount of Each Receipt this Period  
2700.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 77 OF 135 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>Raymond J Zane Esq</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>08 / 26 / 2015 |
| Mailing Address 131 Delaware St   |                                   | <b>Transaction ID : SA11AI.9020</b>                          |
| City<br>Woobury   | State<br>NJ                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>300.00                 |
| Name of Employer<br>Zane & Lozuke   | Occupation<br>Attorney            | <input type="checkbox"/> Memo Item                           |
| Receipt For: 2016<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>3000.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>George R Zoffinger</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>07 / 07 / 2015 |
| Mailing Address 1266 Eagle Rd   |                                   | <b>Transaction ID : SA11AI.9060</b>                          |
| City<br>New Hope  | State<br>PA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>1000.00                |
| Name of Employer<br>Constellation Capital Corp  | Occupation<br>Partner             | <input type="checkbox"/> Memo Item                           |
| Receipt For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1000.00 |  |

|   |                        |  |
|---|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |                        | Date of Receipt<br>M M / D D / Y Y Y Y Y Y |
| Mailing Address   |                        |  |
| City  | State                  | Zip Code                                   |
| FEC ID number of contributing federal political committee.<br>C   |                        | Amount of Each Receipt this Period         |
| Name of Employer  | Occupation             | <input type="checkbox"/> Memo Item         |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date |  |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1300.00   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 237650.00 |

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 78 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW  
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8830**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE  
ATTN: ALLISON STARMANN

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8899**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8832**

Amount of Each Receipt this Period  
2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2015

**Transaction ID : SA11C.8831**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN GAS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 400 N. CAPITOL ST., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11C.8833**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 SEVENTH STREET, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8835**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00







**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 82 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CALPINE CORPORATION PAC**

Mailing Address 4160 DUBLIN BLVD., SUITE 100

City DUBLIN State CA Zip Code 94568

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015

**Transaction ID : SA11C.8847**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CAMPBELL SOUP COMPANY PAC CAMPBELL PAC**

Mailing Address 1 CAMPBELL PLACE MS43K

City CAMDEN State NJ Zip Code 08103

FEC ID number of contributing federal political committee. **C** C00415166

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8848**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL**

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2015

**Transaction ID : SA11C.8849**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

**A.** Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 14 / 2015

**Transaction ID : SA11C.8883**

Amount of Each Receipt this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**B.** Mailing Address 501 THIRD STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

**Transaction ID : SA11C.8851**

Amount of Each Receipt this Period  
 5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
COZEN O'CONNOR POLITICAL ACTION COMMITTEE

**C.** Mailing Address 1900 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00312777

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11C.9009**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8850**

Amount of Each Receipt this Period  
 3000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAY & ZIMMERMANN INC FEDERAL PAC (AKA 'DAYPAC - FEDERAL')**

Mailing Address 1500 SPRING GARDEN STREET

City PHILADELPHIA State PA Zip Code 19130

FEC ID number of contributing federal political committee. **C C00341271**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8853**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION**

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8855**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 85 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DUANE MORRIS GOVERNMENT COMMITTEE**

Mailing Address 30 SOUTH 17TH STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00364133**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8856**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
E.I. DU PONT DE NEMOURS COMPANY GOOD GOVERNMENT FUND (DUPONT GOOD GOVERNMENT FUND)

Mailing Address ATTN: CRAIG D. HODGES  
974 CENTRE RD - CRP 730/4360-1

City WILMINGTON State DE Zip Code 19805

FEC ID number of contributing federal political committee. **C C00171926**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8857**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND**

Mailing Address 8000 W FLORISSANT AVE  
STATION 2310

City ST. LOUIS State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C C00080515**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : SA11C.8859**

Amount of Each Receipt this Period  
2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE**

Mailing Address 76 SOUTH MAIN STREET

City AKRON State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8863**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)**

Mailing Address 1299 PENNSYLVANIA AVE NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2015

**Transaction ID : SA11C.8864**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GIBBONS P.C. PAC, INC.**

Mailing Address ONE GATEWAY CENTER

City NEWARK State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00412635

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8865**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HARRIS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850E

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C C00100321**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2015

**Transaction ID : SA11C.8866**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENCE BLUE CROSS PAC (IBC PAC)**

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C C00450056**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2015

**Transaction ID : SA11C.8869**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP**

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11C.8868**

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

A. Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 27 / 2015

Transaction ID : SA11C.8874

Amount of Each Receipt this Period  
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)  
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00027359**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

Transaction ID : SA11C.8873

Amount of Each Receipt this Period  
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 10 / 2015

Transaction ID : SA11C.8870

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

9000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A. Mailing Address 65 SPRINGFIELD AVENUE

City State Zip Code  
SPRINGFIELD NJ 07081

FEC ID number of contributing federal political committee. **C C00017194**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

Transaction ID : SA11C.8875

Amount of Each Receipt this Period  
 5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

B. Mailing Address 7234 PARKWAY DRIVE

City State Zip Code  
HANOVER MD 21076

FEC ID number of contributing federal political committee. **C C00000885**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

Transaction ID : SA11C.8872

Amount of Each Receipt this Period  
 3000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**LABORERS' INTERNATIONAL UNION**

C. Mailing Address 905 16TH ST NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C70001052**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2015

Transaction ID : SA11C.8876

Amount of Each Receipt this Period  
 2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

10500.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 17 / 2015

**Transaction ID : SA11C.8878**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &**

Mailing Address 9000 MACHINISTS PLACE

City UPPER MARLBORO State MD Zip Code 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2015

**Transaction ID : SA11C.8879**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MGM RESORTS INTERNATIONAL PAC**

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C** C00299321

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 08 / 2015

**Transaction ID : SA11C.8880**

Amount of Each Receipt this Period  
2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 92 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00238725

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8884**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE., NW

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00238725

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8885**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>CHICAGO | State<br>IL | Zip Code<br>60611 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00030718

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2015

**Transaction ID : SA11C.8894**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11C.8895**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 KING STREET SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9285**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL EDUCATION ASSOCIATION**

Mailing Address 1201 SIXTEENTH ST NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000492

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9283**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL GROCERS ASSOCIATION GROCERS PAC**

Mailing Address 1005 NORTH GLEBE ROAD SUITE 250

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00508770**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.8886**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC**

Mailing Address 2525 HARRODSBURG ROAD

City LEXINGTON State KY Zip Code 40504

FEC ID number of contributing federal political committee. **C C00360008**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9286**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00107128**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.9284**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 95 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**

Mailing Address 920 MASSACHUSETTS AVE, NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8887**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F ST NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11C.8888**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PEPCO HOLDINGS INC POLITICAL ACTION COMMITTEE AKA PHI PAC**

Mailing Address 701 NINTH STREET NW ROOM EP1202

City WASHINGTON State DC Zip Code 20068

FEC ID number of contributing federal political committee. **C C00385849**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2015

**Transaction ID : SA11C.8838**

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                |
|---|--|----------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 96 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**PFIZER INC. PAC**

Mailing Address **235 EAST 42ND STREET**

City **NEW YORK** State **NY** Zip Code **10017**

FEC ID number of contributing federal political committee. **C C00016683**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 24 / 2015**

**Transaction ID : SA11C.8889**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1500.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**POLITICAL EDUCATIONAL FUND OF THE BUILDING AND CONSTRUCTION TRADES DEPARTMENT, AFL-CIO**

Mailing Address **815 16TH ST., NW, SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00003160**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2015**

**Transaction ID : SA11C.8843**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PREIT-RUBIN INC POLITICAL ACTION COMMITTEE**

Mailing Address **200 SOUTH BROAD ST 3RD FLOOR**

City **PHILADELPHIA** State **PA** Zip Code **19102**

FEC ID number of contributing federal political committee. **C C00457606**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 15 / 2015**

**Transaction ID : SA11C.8891**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1500.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\_\_\_\_\_ **4000.00**

\_\_\_\_\_



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 PARK PLAZA

City State Zip Code  
NEWARK NJ 07102

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4890.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11C.8892**

Amount of Each Receipt this Period  
 2390.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
PUBLIC SERVICE ENTERPRISE GROUP INC. POLITICAL ACTION COMMITTEE (PEGPAC)

Mailing Address 80 PARK PLAZA

City State Zip Code  
NEWARK NJ 07102

FEC ID number of contributing federal political committee. **C** C00383489

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2015

**Transaction ID : SA11C.8893**

Amount of Each Receipt this Period  
 110.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 30 HUNTER LANE

City State Zip Code  
CAMP HILL PA 17011

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2015

**Transaction ID : SA11C.8897**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

**A.** Mailing Address 1800 MASSACHUSETTS AVE NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2015

**Transaction ID : SA11C.8898**

Amount of Each Receipt this Period  
 2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**STV GROUP INC POLITICAL ACTION COMMITTEE**

**B.** Mailing Address 205 WEST WELSH DRIVE

City State Zip Code  
DOUGLASSVILLE PA 19518

FEC ID number of contributing federal political committee. **C** C00214866

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2015

**Transaction ID : SA11C.8900**

Amount of Each Receipt this Period  
 1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)**

**C.** Mailing Address PO BOX 666

City State Zip Code  
BELLE GLADE FL 33430

FEC ID number of contributing federal political committee. **C** C00254656

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : SA11C.8901**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2015

**Transaction ID : SA11C.8852**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 08 / 2015

**Transaction ID : SA11C.8903**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

**Transaction ID : SA11C.8904**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**U.S.-CUBA DEMOCRACY POLITICAL ACTION COMMITTEE**

Mailing Address P.O. BOX 22945

City State Zip Code  
HIALEAH FL 33002

FEC ID number of contributing federal political committee. **C C00387720**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : SA11C.8906**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP**

Mailing Address THREE PARK PLACE

City State Zip Code  
ANNAPOLIS MD 21401

FEC ID number of contributing federal political committee. **C C00012476**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2015

**Transaction ID : SA11C.8890**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 PENNSYLVANIA AVE, NW  
10TH FLOOR

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2015

**Transaction ID : SA11C.8905**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

123000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

|   |  |                 |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 101 OF 135 |
|   | <input type="checkbox"/> 11a<br>12 <input checked="" type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |                 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD W NORCROSS**

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

FEC ID number of contributing federal political committee. **C H4NJ01084**

Name of Employer Occupation  
US Federal Government Member, US House of Representatives

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15161.83**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 20 2015

**Transaction ID : SA13A.9324**

Amount of Each Receipt this Period  
 15161.83

Memo Item  
 Loan - See Memo Text

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D 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

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

15161.83

15161.83

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13A

Transaction ID : SA13A.9324

Personal loan securing campaign vehicle lease term obligation beyond current office term. See Transaction ID: SB/17.9236.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15  
 PAGE 103 OF 135

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD W NORCROSS**

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
 CAMDEN NJ 08102

FEC ID number of contributing federal political committee. **C H4NJ01084**

Name of Employer Occupation  
 US Federal Government Member, US House of Representatives

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify) **15197.71**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 30 2015**

**Transaction ID : SA15.9319**

Amount of Each Receipt this Period  
**35.88**

Memo Item  
 Reimbursement for Personal Use of Campaign Vehicle

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify)

Date of Receipt  
 M M M / D 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

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Election Cycle-to-Date  
 Primary  General  
 Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**35.88**

**35.88**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 104 OF 135 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 01 / 2015 |  |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>0.40               |  |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8807</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: _____  | District: _____  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 11 / 2015 |  |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>59.25              |  |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8808</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: _____  | District: _____  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 01 / 2015 |  |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>59.25              |  |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8809</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: _____  | District: _____  |                          |   |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 118.90 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 105 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 07 / 2015           |
| Mailing Address 366 Summer St   |  | Amount of Each Disbursement this Period<br>59.25                        |
| City Somerville State MA Zip Code 02144   | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8810</b> |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 11 / 2015           |
| Mailing Address 366 Summer St   |  | Amount of Each Disbursement this Period<br>59.25                        |
| City Somerville State MA Zip Code 02144   | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8812</b> |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2015           |
| Mailing Address 366 Summer St   |  | Amount of Each Disbursement this Period<br>59.25                        |
| City Somerville State MA Zip Code 02144   | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8813</b> |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 177.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 106 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>39.50              |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | <b>Transaction ID : SB17.8814</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>19.75              |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | <b>Transaction ID : SB17.8815</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>59.25              |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | <b>Transaction ID : SB17.8816</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 118.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 107 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 16 / 2015 |
| Mailing Address 366 Summer St  |  | Amount of Each Disbursement this Period<br>29.63              |
| City Somerville State MA Zip Code 02144  | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name   |  | <input type="checkbox"/> Memo Item                            |
| 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) | <b>Transaction ID : SB17.8817</b>                             |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 16 / 2015 |
| Mailing Address 366 Summer St  |  | Amount of Each Disbursement this Period<br>19.75              |
| City Somerville State MA Zip Code 02144  | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name   |  | <input type="checkbox"/> Memo Item                            |
| 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) | <b>Transaction ID : SB17.8818</b>                             |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b>                                  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 22 / 2015 |
| Mailing Address 366 Summer St  |  | Amount of Each Disbursement this Period<br>59.25              |
| City Somerville State MA Zip Code 02144  | Purpose of Disbursement Processing Fee<br>003<br>Category/Type   |   |
| Candidate Name   |  | <input type="checkbox"/> Memo Item                            |
| 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) | <b>Transaction ID : SB17.8819</b>                             |
| State: District:   |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 108.63 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 108 OF 135                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>3.95               |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8820</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>19.75              |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8821</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>0.40               |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8822</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 24.10 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 109 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>7.90               |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8823</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ActBlue Technical Services</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address 366 Summer St   |  |                          | Amount of Each Disbursement this Period<br>0.20               |  |
| City<br>Somerville  | State<br>MA  | Zip Code<br>02144        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Processing Fee   |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.8824</b>                             |  |
| Candidate Name  |  |                          |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                   |   |  |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. American Express</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |  |
| Mailing Address PO Box 1270   |  |                   | Amount of Each Disbursement this Period<br>2647.71            |  |
| City<br>Newark  | State<br>NJ  | Zip Code<br>07101 | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Candidate Expenses - Itemized Below  |  | Category/<br>Type | Transaction ID : <b>SB17.9274</b>                             |  |
| Candidate Name  |  |                   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |  |
| State: District:  |  |                   |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2655.81 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 110 OF 135                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |  |  |  |
|---|--|--------------------------|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Joe's Seafood</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 09 / 2015                        |  |  |
| Mailing Address 750 15th St NW  |  |                          | Amount of Each Disbursement this Period<br>251.92                                    |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20005        | <input checked="" type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.9274.3</b> |  |  |
| Purpose of Disbursement<br>Meeting / Meal Expense   |  | Category/<br>Type<br>001 |  |  |  |
| Candidate Name  |  |                          |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |  |
| State: _____  | District: _____  |                          |  |  |  |

|   |  |                          |  |  |  |
|---|--|--------------------------|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. National Democratic Club</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 27 / 2015                        |  |  |
| Mailing Address 30 Ivy St SE  |  |                          | Amount of Each Disbursement this Period<br>1381.25                                   |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20003        | <input checked="" type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.9274.9</b> |  |  |
| Purpose of Disbursement<br>Fundraising Reception Expense  |  | Category/<br>Type<br>003 |  |  |  |
| Candidate Name  |  |                          |  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |  |  |  |
| State: _____  | District: _____  |                          |  |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Charlie Palmer Steak</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 28 / 2015                         |  |  |
| Mailing Address 101 Constitution Ave NW   |  |                          | Amount of Each Disbursement this Period<br>306.85                                     |  |  |
| City<br>Washington  | State<br>DC  | Zip Code<br>20001        | <input checked="" type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.9274.10</b> |  |  |
| Purpose of Disbursement<br>Meeting / Meal   |  | Category/<br>Type<br>001 |   |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: _____  | District: _____  |                          |   |  |  |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 111 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Staples</b> |             | Date of Disbursement<br>MM / DD / YYYY<br>08 / 20 / 2015 |
| Mailing Address 2230 Marlton Pike West                       |             | Amount of Each Disbursement this Period<br>242.86        |
| City<br>Cherry Hill  | State<br>NJ |  |
| Purpose of Disbursement<br>Office Supplies Expense           |             | <input type="checkbox"/> Category/<br>Type<br>001        |
| Candidate Name   |             |  |
| State:   | District:   |  |

|  |             |  |
|--|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Caffè Aldo Lamberti</b> |             | Date of Disbursement<br>MM / DD / YYYY<br>07 / 27 / 2015 |
| Mailing Address 2011 Route 70 West                                       |             | Amount of Each Disbursement this Period<br>243.03        |
| City<br>Cherry Hill  | State<br>NJ |  |
| Purpose of Disbursement<br>Meeting / Meal Expense                        |             | <input type="checkbox"/> Category/<br>Type<br>001        |
| Candidate Name   |             |  |
| State:   | District:   |  |

|   |             |  |
|---|-------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Ameriprise Financial / American Enterprise</b> |             | Date of Disbursement<br>MM / DD / YYYY<br>07 / 15 / 2015 |
| Mailing Address Ameriprise Financial Center   |             | Amount of Each Disbursement this Period<br>75.00         |
| City<br>Minneapolis   | State<br>MN |  |
| Purpose of Disbursement<br>Interest Payment   |             | <input type="checkbox"/> Category/<br>Type<br>009        |
| Candidate Name  |             |  |
| State:  | District:   |  |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 75.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 112 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |                              |  |   |  |
|---|------------------------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Angerholzer Broz Consulting, LLC</b> |                              |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015 |  |
| Mailing Address 499 South Capitol St SW<br>Suite 422                                  |                              |  | Amount of Each Disbursement this Period<br>5166.12            |  |
| City Washington   | State DC                     | Zip Code 20003   | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Consulting Services Expense - Fundraising                  |                              |  | Transaction ID : <b>SB17.9213</b>                             |  |
| Candidate Name  |                              |  | Category/Type<br>003  |  |
| Office Sought:  | House<br>Senate<br>President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:  | District:                    |  |   |  |

|   |                              |  |   |  |
|---|------------------------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Angerholzer Broz Consulting, LLC</b> |                              |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2015 |  |
| Mailing Address 499 South Capitol St SW<br>Suite 422                                  |                              |  | Amount of Each Disbursement this Period<br>4681.16            |  |
| City Washington   | State DC                     | Zip Code 20003   | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Consulting Services Expense - Fundraising                  |                              |  | Transaction ID : <b>SB17.9224</b>                             |  |
| Candidate Name  |                              |  | Category/Type<br>003  |  |
| Office Sought:  | House<br>Senate<br>President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:  | District:                    |  |   |  |

|   |                              |  |   |  |
|---|------------------------------|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. Angerholzer Broz Consulting, LLC</b> |                              |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2015 |  |
| Mailing Address 499 South Capitol St SW<br>Suite 422                                  |                              |  | Amount of Each Disbursement this Period<br>6556.00            |  |
| City Washington   | State DC                     | Zip Code 20003   | <input type="checkbox"/> Memo Item                            |  |
| Purpose of Disbursement<br>Consulting Services Expense - Fundraising                  |                              |  | Transaction ID : <b>SB17.9257</b>                             |  |
| Candidate Name  |                              |  | Category/Type<br>003  |  |
| Office Sought:  | House<br>Senate<br>President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |  |
| State:  | District:                    |  |   |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 16403.28 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 113 OF 135                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AT&amp;T Mobility</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015 |
| Mailing Address PO Box 6463   |  | Amount of Each Disbursement this Period<br>265.68             |
| City<br>Carol Stream  | State<br>IL  |   |
| Zip Code<br>60197   | Purpose of Disbursement<br>Telecommunications Expense  | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/<br>Type<br>001   | <b>Transaction ID : SB17.9217</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T Mobility</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 14 / 2015 |
| Mailing Address PO Box 6463   |  | Amount of Each Disbursement this Period<br>236.41             |
| City<br>Carol Stream  | State<br>IL  |   |
| Zip Code<br>60197   | Purpose of Disbursement<br>Telecommunications Expense  | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/<br>Type<br>001   | <b>Transaction ID : SB17.9235</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AT&amp;T Mobility</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2015 |
| Mailing Address PO Box 6463   |  | Amount of Each Disbursement this Period<br>862.66             |
| City<br>Carol Stream  | State<br>IL  |   |
| Zip Code<br>60197   | Purpose of Disbursement<br>Telecommunications Expense  | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/<br>Type<br>001   | <b>Transaction ID : SB17.9260</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1364.75 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 114 OF 135                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Caffè Aldo Lamberti</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 22 / 2015 |  |  |
| Mailing Address 2011 Route 70 West  |  |                          | Amount of Each Disbursement this Period<br>14153.20           |  |  |
| City<br>Cherry Hill   | State<br>NJ  | Zip Code<br>08002        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Fundraising Reception Expense  |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.9270</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Jewish Community Voice</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2015 |  |  |
| Mailing Address 1301 Springdale Rd<br>Suite 250   |  |                          | Amount of Each Disbursement this Period<br>353.30             |  |  |
| City<br>Cherry Hill   | State<br>NJ  | Zip Code<br>08003        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Donation / Advertisement   |  | Category/<br>Type<br>004 | Transaction ID : <b>SB17.9259</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Listrak</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 02 / 2015 |  |  |
| Mailing Address 529 East Main St  |  |                          | Amount of Each Disbursement this Period<br>375.00             |  |  |
| City<br>Lititz  | State<br>PA  | Zip Code<br>17543        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Telecommunications Expense   |  | Category/<br>Type<br>001 | Transaction ID : <b>SB17.9212</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 14881.50 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 115 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Listrak</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 23 / 2015 |
| Mailing Address 529 East Main St  |  | Amount of Each Disbursement this Period<br>375.00             |
| City Lititz   | State PA Zip Code 17543  |   |
| Purpose of Disbursement<br>Telecommunications Expense   | Candidate Name   | <input type="checkbox"/> Memo Item                            |
| Category/Type<br>001  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.9222</b>                             |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Listrak</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2015 |
| Mailing Address 529 East Main St  |  | Amount of Each Disbursement this Period<br>375.00             |
| City Lititz   | State PA Zip Code 17543  |   |
| Purpose of Disbursement<br>Telecommunications Expense   | Candidate Name   | <input type="checkbox"/> Memo Item                            |
| Category/Type<br>001  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.9243</b>                             |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Listrak</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 22 / 2015 |
| Mailing Address 529 East Main St  |  | Amount of Each Disbursement this Period<br>375.00             |
| City Lititz   | State PA Zip Code 17543  |   |
| Purpose of Disbursement<br>Telecommunications Expense   | Candidate Name   | <input type="checkbox"/> Memo Item                            |
| Category/Type<br>001  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB17.9271</b>                             |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1125.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 116 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mall Chevrolet</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 14 / 2015 |
| Mailing Address 75 Haddonfield Rd   |  | Amount of Each Disbursement this Period<br>10000.00      |
| City<br>Cherry Hill   | State<br>NJ  |  |
| Zip Code<br>08002   | Purpose of Disbursement<br>Campaign Vehicle - Down Payment   | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type  | <b>Transaction ID : SB17.9231</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mall Chevrolet</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 20 / 2015 |
| Mailing Address 75 Haddonfield Rd   |  | Amount of Each Disbursement this Period<br>17997.92      |
| City<br>Cherry Hill   | State<br>NJ  |  |
| Zip Code<br>08002   | Purpose of Disbursement<br>Campaign Vehicle - Balance  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type<br>001   | <b>Transaction ID : SB17.9236</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. NJ State AFL CIO</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 06 / 2015 |
| Mailing Address 106 West State St   |  | Amount of Each Disbursement this Period<br>500.00        |
| City<br>Trenton   | State<br>NJ  |  |
| Zip Code<br>08608   | Purpose of Disbursement<br>Donation / Advertisement  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type<br>004   | <b>Transaction ID : SB17.9214</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 28497.92 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : SB17.9236

Total campaign vehicle lease obligation is \$27,881.42, \$15,161.83 of which is secured by a personal loan from Donald W. Norcross for that period of the campaign vehicle lease term obligation beyond the current office term. See Transaction ID: SC/10.9324.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 118 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Pam's List</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 22 / 2015 |
| Mailing Address 1401 Washington St  |  | Amount of Each Disbursement this Period<br>500.00        |
| City Hoboken  | State NJ   |  |
| Zip Code 07030  | Purpose of Disbursement<br>Donation / Sponsor  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type<br>012   | <b>Transaction ID : SB17.9266</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Anthony R Pittman Jr.</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 22 / 2015 |
| Mailing Address 20 Scenic View Dr   |  | Amount of Each Disbursement this Period<br>2500.00       |
| City Sicklerville   | State NJ   |  |
| Zip Code 08081  | Purpose of Disbursement<br>Consulting Services Expense - Advance   | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type<br>001   | <b>Transaction ID : SB17.9265</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Progressive Auto Insurance</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 14 / 2015 |
| Mailing Address PO Box 413  |  | Amount of Each Disbursement this Period<br>3734.00       |
| City Marlton  | State NJ   |  |
| Zip Code 08053  | Purpose of Disbursement<br>Auto Insurance Expense  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/Type<br>001   | <b>Transaction ID : SB17.9233</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 6734.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 119 OF 135 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Progressive Auto Insurance</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2015 |  |  |
| Mailing Address PO Box 413  |  |                          | Amount of Each Disbursement this Period<br>46.00              |  |  |
| City<br>Marlton   | State<br>NJ  | Zip Code<br>08053        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Auto Insurance Expense   |  | Category/<br>Type<br>001 | Transaction ID : <b>SB17.9261</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. RP Consulting, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 20 / 2015 |  |  |
| Mailing Address PO Box 3540   |  |                          | Amount of Each Disbursement this Period<br>5000.00            |  |  |
| City<br>Cherry Hill   | State<br>NJ  | Zip Code<br>08034        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Consulting Services Expense - Fundraising  |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.9220</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |  |                          |   |  |  |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. RP Consulting, LLC</b>   |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2015 |  |  |
| Mailing Address PO Box 3540   |  |                          | Amount of Each Disbursement this Period<br>5000.00            |  |  |
| City<br>Cherry Hill   | State<br>NJ  | Zip Code<br>08034        | Memo Item <input type="checkbox"/>                            |  |  |
| Purpose of Disbursement<br>Consulting Services Expense - Fundraising  |  | Category/<br>Type<br>003 | Transaction ID : <b>SB17.9239</b>                             |  |  |
| Candidate Name  |  |                          |   |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |  |
| State: District:  |  |                          |   |  |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 10046.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 120 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RP Consulting, LLC</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2015 |
| Mailing Address PO Box 3540   |  | Amount of Each Disbursement this Period<br>5000.00            |
| City<br>Cherry Hill   | State<br>NJ  |   |
| Zip Code<br>08034   | Purpose of Disbursement<br>Consulting Services Expense - Fundraising   | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/Type<br>003   | <b>Transaction ID : SB17.9258</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Staples</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2015 |
| Mailing Address 2230 Marlton Pike West  |  | Amount of Each Disbursement this Period<br>10.14              |
| City<br>Cherry Hill   | State<br>NJ  |   |
| Zip Code<br>08002   | Purpose of Disbursement<br>Office Supplies Expense   | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/Type<br>001   | <b>Transaction ID : SB17.9248</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. TD Bank</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015 |
| Mailing Address PO Box 8400   |  | Amount of Each Disbursement this Period<br>152.79             |
| City<br>Lewiston  | State<br>ME  |   |
| Zip Code<br>04243   | Purpose of Disbursement<br>Interest Payment  | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Category/Type<br>009   | <b>Transaction ID : SB17.8795</b>                             |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5162.93 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 121 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TD Bank</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015           |
| Mailing Address PO Box 8400                                  |  | Amount of Each Disbursement this Period<br>67.80                        |
| City Lewiston State ME Zip Code 04243                        | Purpose of Disbursement Interest Payment<br>009<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8796</b> |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TD Bank</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2015           |
| Mailing Address PO Box 8400                                  |  | Amount of Each Disbursement this Period<br>154.12                       |
| City Lewiston State ME Zip Code 04243                        | Purpose of Disbursement Interest Payment<br>009<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8797</b> |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. TD Bank</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2015           |
| Mailing Address PO Box 8400                                  |  | Amount of Each Disbursement this Period<br>72.74                        |
| City Lewiston State ME Zip Code 04243                        | Purpose of Disbursement Interest Payment<br>009<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8800</b> |
| State: District:   |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 294.66 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 122 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. TD Bank</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 11 / 2015 |
| Mailing Address 1701 Route 70 East  |  | Amount of Each Disbursement this Period<br>20.00         |
| City<br>Cherry Hill   | State<br>NJ  |  |
| Zip Code<br>08034   | Purpose of Disbursement<br>Bank Fee  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/<br>Type<br>001   | <b>Transaction ID : SB17.9226</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TD Bank</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 02 / 2015 |
| Mailing Address PO Box 8400   |  | Amount of Each Disbursement this Period<br>114.61        |
| City<br>Lewiston  | State<br>ME  |  |
| Zip Code<br>04243   | Purpose of Disbursement<br>Interest Payment  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/<br>Type<br>009   | <b>Transaction ID : SB17.8801</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>c. TD Bank</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 02 / 2015 |
| Mailing Address PO Box 8400   |  | Amount of Each Disbursement this Period<br>89.97         |
| City<br>Lewiston  | State<br>ME  |  |
| Zip Code<br>04243   | Purpose of Disbursement<br>Interest Payment  | <input type="checkbox"/> Memo Item                       |
| Candidate Name  | Category/<br>Type<br>009   | <b>Transaction ID : SB17.8802</b>                        |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 224.58 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 123 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TD Bank</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015           |
| Mailing Address PO Box 8400                                  |  | Amount of Each Disbursement this Period<br>13.01                        |
| City Lewiston State ME Zip Code 04243                        | Purpose of Disbursement Interest Payment<br>009<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8804</b> |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TD Bank</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015           |
| Mailing Address PO Box 8400                                  |  | Amount of Each Disbursement this Period<br>132.94                       |
| City Lewiston State ME Zip Code 04243                        | Purpose of Disbursement Interest Payment<br>009<br>Category/Type   |   |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.8805</b> |
| State: District:   |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>c. Trenton Printing</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 24 / 2015           |
| Mailing Address 1150 Southard St                                      |  | Amount of Each Disbursement this Period<br>7371.67                      |
| City Trenton State NJ Zip Code 08638                                  | Purpose of Disbursement Printing & Mailing Expense - Fundraising<br>003<br>Category/Type   |   |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <input type="checkbox"/> Memo Item<br><b>Transaction ID : SB17.9242</b> |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 7517.62 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                 |  |  |  |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 124 OF 135 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |                 |  |  |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |                                       |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. UPS</b>   |  | Date of Disbursement                  |
| Mailing Address PO Box 7247-0244   |  | M M / D D / Y Y Y Y<br>07 / 13 / 2015 |
| City Philadelphia  | State PA   | Zip Code 19170                        |
| Purpose of Disbursement<br>Express Mail Expense  | Category/Type<br>001   |                                       |
| Candidate Name   | Amount of Each Disbursement this Period<br>63.43   |                                       |
| 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:   | Memo Item <input type="checkbox"/>   |                                       |
|  |  | Transaction ID : SB17.9218            |

|  |  |                                       |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. UPS</b>   |  | Date of Disbursement                  |
| Mailing Address PO Box 7247-0244   |  | M M / D D / Y Y Y Y<br>07 / 17 / 2015 |
| City Philadelphia  | State PA   | Zip Code 19170                        |
| Purpose of Disbursement<br>Express Mail Expense  | Category/Type<br>001   |                                       |
| Candidate Name   | Amount of Each Disbursement this Period<br>41.83   |                                       |
| 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:   | Memo Item <input type="checkbox"/>   |                                       |
|  |  | Transaction ID : SB17.9219            |

|  |  |                                       |
|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. UPS</b>   |  | Date of Disbursement                  |
| Mailing Address PO Box 7247-0244   |  | M M / D D / Y Y Y Y<br>07 / 23 / 2015 |
| City Philadelphia  | State PA   | Zip Code 19170                        |
| Purpose of Disbursement<br>Express Mail Expense  | Category/Type<br>001   |                                       |
| Candidate Name   | Amount of Each Disbursement this Period<br>15.16   |                                       |
| 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:   | Memo Item <input type="checkbox"/>   |                                       |
|  |  | Transaction ID : SB17.9221            |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 120.42 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          |                                    | PAGE 125 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. UPS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 14 / 2015 |
| Mailing Address PO Box 7247-0244  |  | Amount of Each Disbursement this Period<br>51.16              |
| City Philadelphia   | State PA Zip Code 19170  |   |
| Purpose of Disbursement<br>Express Mail Expense   | Category/Type<br>001   | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Transaction ID : <b>SB17.9227</b>  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. UPS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 20 / 2015 |
| Mailing Address PO Box 7247-0244  |  | Amount of Each Disbursement this Period<br>15.08              |
| City Philadelphia   | State PA Zip Code 19170  |   |
| Purpose of Disbursement<br>Express Mail Expense   | Category/Type<br>001   | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Transaction ID : <b>SB17.9238</b>  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. UPS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 31 / 2015 |
| Mailing Address PO Box 7247-0244  |  | Amount of Each Disbursement this Period<br>20.79              |
| City Philadelphia   | State PA Zip Code 19170  |   |
| Purpose of Disbursement<br>Express Mail Expense   | Category/Type<br>001   | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Transaction ID : <b>SB17.9247</b>  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 51.03 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 126 OF 135                     |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. UPS</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 17 / 2015 |
| Mailing Address PO Box 7247-0244                         |  | Amount of Each Disbursement this Period<br>30.16              |
| City Philadelphia  | State PA Zip Code 19170  |   |
| Purpose of Disbursement Express Mail Expense             | Category/Type 001  | <input type="checkbox"/> Memo Item                            |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President             | <b>Transaction ID : SB17.9256</b>                             |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. US House of Representatives Gift Shop</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 29 / 2015 |
| Mailing Address Longworth Bldg   |  | Amount of Each Disbursement this Period<br>55.20              |
| City Washington  | State DC Zip Code 20515  |   |
| Purpose of Disbursement Gift Expense   | Category/Type  | <input type="checkbox"/> Memo Item                            |
| Candidate Name   | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President             | <b>Transaction ID : SB17.9223</b>                             |
| State: District:   | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. US Postmaster (Collingswood)</b> |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015 |
| Mailing Address Haddon Ave  |  | Amount of Each Disbursement this Period<br>164.00             |
| City Collingswood   | State NJ Zip Code 08108  |   |
| Purpose of Disbursement Postage Expense   | Category/Type 001  | <input type="checkbox"/> Memo Item                            |
| Candidate Name  | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President             | <b>Transaction ID : SB17.9216</b>                             |
| 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).....      | 249.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 127 OF 135                    |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. US Postmaster (Trenton)</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2015                            |
| Mailing Address 680 US Hwy 130  |  | Amount of Each Disbursement this Period<br>4249.65<br><input type="checkbox"/> Memo Item |
| City<br>Trenton   | State<br>NJ  |  |
| Purpose of Disbursement<br>Postage Expense  | Zip Code<br>08650  | Transaction ID : <b>SB17.9225</b>  |
| Candidate Name  | Category/<br>Type<br>003   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y                                       |
| Mailing Address   |  | Amount of Each Disbursement this Period<br><br><input type="checkbox"/> Memo Item |
| City  | State Zip Code   |   |
| Purpose of Disbursement   | Category/<br>Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y                                       |
| Mailing Address   |  | Amount of Each Disbursement this Period<br><br><input type="checkbox"/> Memo Item |
| City  | State Zip Code   |   |
| Purpose of Disbursement   | Category/<br>Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4249.65   |
| <b>TOTAL</b> This Period (last page this line number only)..... | 100201.39 |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |                                      |                                    |   |                                    |
|---|--------------------------------------|------------------------------------|---|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 128 OF 135   |                                    |
|   | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input checked="" type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Ameriprise Financial / American Enterprise</b>                           |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 15 / 2015 |  |
| Mailing Address Ameriprise Financial Center   |  |                          | Amount of Each Disbursement this Period<br>20000.00           |  |
| City<br>Minneapolis   | State<br>MN  | Zip Code<br>55474        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Loan - Principal Payment   |  | Category/<br>Type<br>009 |   |  |
| Candidate Name  |  |                          | Transaction ID : <b>SB19A.8792</b>                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. TD Bank</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>07 / 06 / 2015 |  |
| Mailing Address PO Box 8400   |  |                          | Amount of Each Disbursement this Period<br>372.22             |  |
| City<br>Lewiston  | State<br>ME  | Zip Code<br>04243        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Loan - Principal Payment   |  | Category/<br>Type<br>009 |   |  |
| Candidate Name  |  |                          | Transaction ID : <b>SB19A.8794</b>                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |  |                          |   |  |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>c. TD Bank</b>  |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y<br>08 / 01 / 2015 |  |
| Mailing Address PO Box 8400   |  |                          | Amount of Each Disbursement this Period<br>10370.15           |  |
| City<br>Lewiston  | State<br>ME  | Zip Code<br>04243        | Memo Item <input type="checkbox"/>                            |  |
| Purpose of Disbursement<br>Loan - Principal Payment   |  | Category/<br>Type<br>009 |   |  |
| Candidate Name  |  |                          | Transaction ID : <b>SB19A.8799</b>                            |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                          |   |  |
| State: District:  |  |                          |   |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 30742.37 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

|   |                                      |                                    |  |                                    |
|---|--------------------------------------|------------------------------------|--|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 129 OF 135                                |                                    |
|   | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input checked="" type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. TD Bank</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 02 / 2015 |
| Mailing Address PO Box 8400  |  | Amount of Each Disbursement this Period<br>25312.49           |
| City Lewiston State ME Zip Code 04243  | Purpose of Disbursement<br>Loan - Principal Payment  |   |
| Candidate Name   | Category/Type<br>009   | <input type="checkbox"/> Memo Item                            |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB19A.8803</b>                            |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. TD Bank</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 30 / 2015 |
| Mailing Address PO Box 8400  |  | Amount of Each Disbursement this Period<br>30891.49           |
| City Lewiston State ME Zip Code 04243  | Purpose of Disbursement<br>Loan - Principal Payment  |   |
| Candidate Name   | Category/Type<br>009   | <input type="checkbox"/> Memo Item                            |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Transaction ID : SB19A.8806</b>                            |
| State: District:   |  |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | Amount of Each Disbursement this Period     |
| City State Zip Code  | Purpose of Disbursement  |   |
| Candidate Name   | Category/Type  | <input type="checkbox"/> Memo Item          |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 56203.98 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 86946.35 |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.6722**  
**DONALD NORCROSS FOR CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  Memo Item  
**DONALD W NORCROSS**  
Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1 MARKET STREET UNIT 522  
City State ZIP Code  
CAMDEN NJ 08102

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
70000.00 70000.00 0.00

**TERMS**  
Date Incurred Date Due Interest Rate Secured:  
10 / 15 / 2014 DEMAND 4.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |
| Mailing Address                            | Occupation                     |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |

**SUBTOTALS** This Period This Page (optional)..... ▶ 0.00  
**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **DONALD NORCROSS FOR CONGRESS** Transaction ID : **SC/10.7255**

|  |                                    |   |
|--|------------------------------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br><b>DONALD W NORCROSS</b> | <input type="checkbox"/> Memo Item | Election: 2014<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address<br>1 MARKET STREET UNIT 522  |                                    |   |

|        |       |          |
|--------|-------|----------|
| City   | State | ZIP Code |
| CAMDEN | NJ    | 08102    |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 80000.00                | 80000.00                   | 0.00  |

**TERMS**

|                |          |               |   |
|----------------|----------|---------------|---|
| Date Incurred  | Date Due | Interest Rate | Secured:  |
| 10 / 21 / 2014 | DEMAND   | 6.75 % (apr)  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....  | [ ] 0.00 |
| <b>TOTALS</b> This Period (last page in this line only).....  | [ ]      |
| <b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b> |          |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **DONALD NORCROSS FOR CONGRESS** Transaction ID : **SC/10.9324**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **PERSONAL FUNDS**  Memo Item  
**DONALD W NORCROSS**

Election: 2016  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 1 MARKET STREET UNIT 522

City State ZIP Code  
 CAMDEN NJ 08102

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>15161.83 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>15161.83 |
|-------------------------------------|------------------------------------|---|

**TERMS**

Date Incurred: M 09 / D 20 / Y 2015  
 Date Due: M / D / Y DEMAND  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |          |
|--|----------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | 15161.83 |
| <b>TOTALS</b> This Period (last page in this line only)..... | 15161.83 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : SC/10.9324

Personal loan securing campaign vehicle lease term obligation beyond current office term. See Transaction ID: SB/17.9236.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
152.79

Transaction ID : SD10.8637

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 152.79 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8787

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
75.00 75.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8788

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
221.92 221.92 0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8789

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
187.35 187.35 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8790

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
102.98 102.98 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**DONALD W NORCROSS**

Nature of Debt (Purpose):  
Interest Due on Loan

Mailing Address 1 MARKET STREET UNIT 522

City State Zip Code  
CAMDEN NJ 08102

Outstanding Balance Beginning This Period  
0.00

Transaction ID : SD10.8791

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
132.94 132.94 0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00  
0.00  
  
0.00