

REPORT OF RECEIPTS AND DISBURSEMENTS

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For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (In full) Florio for Senate Committee, Inc.		RECEIVED SECRETARY OF THE SENATE 00 FEB -2 AM 11:00 2. FEC IDENTIFICATION NUMBER C00345280 HAND DELIVERED <input checked="" type="checkbox"/>
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported 390 George Street Suite 404		
CITY, STATE, and ZIP CODE New Brunswick NJ 08901	STATE / DISTRICT I	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

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

☐ Twelfth day report preceding _____
 (election type) _____ election on _____ in the State of _____.

☐ Thirtieth day report following the General Election

☐ Termination report

This report contains activity for ☒ Primary election ☒ General election ☐ Runoff election ☐ Special election

SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
07/01/1999 through 12/31/1999		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	511500.00	1063219.00
(b) Total Contribution Refunds (from line 20(d))	3200.00	3200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	508300.00	1060019.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	447780.14	469837.32
(b) Total Offsets to Operating Expenditures (from line 14)	3780.00	3780.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	444000.14	466057.32
8. Cash on Hand at Close of Reporting Period (from line 27)	796340.93	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	200000.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer
Electronically Filed by George R. Zoffinger

Signature of Treasurer

Date

1/31/00

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

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FEC FORM 3
(revised 4/87)

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To: 12/31/1999

COLUMN B
Calendar Year-To-Date

0.00

0.00

3780.00

3780.00

2479.25

1369478.25

469837.32

0.00

100000.00

3200.00

100.00

573137.32

23.

24.

25.

26.

27.

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Robert C. Beck 1701 Route 70 East Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Parker McCay & Criscuolo Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Robert C. Beck 1701 Route 70 East Cherry Hill NJ 08003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Parker McCay & Criscuolo Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David B. Gardner 20 Park Place Short Hills NJ 07078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Larken Associates Occupation Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David B. Gardner 20 Park Place Short Hills NJ 07078 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Larken Associates Occupation Vice President Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David F. Grimm 1605 S. Crescent Blvd. Yardley PA 19067 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Allied Vision Services Occupation Optometry Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Jemo Kang 4915 Province Line Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. Jemo Kang 4915 Province Line Road Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Businessman Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003306

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Miles Lerman 1450 East Chestnut Avenue Vineland NJ 08361 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Business Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Pat Santangelo Five Country Squire Road Saddle River NJ 07458 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lincoln Technical Institute Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Neil Savad 323 Wertsville Road Ringoes NJ 08551 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Trans County Title Agency Occupation Title Insurance Agent Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Marc Silver 1417 Brace Road Cherry Hill NJ 08034 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer SCM, Inc. Occupation Administrator Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Michael L. Zumpino 817 Sullivan Drive Upper Gwynedd PA 19446 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Triad Associates Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 07/24/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Elena S. Carnevale 2737 Devonshire Place, NW No. 514 Washington DC 20008 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Population Reference Occupation Communications Director Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Elena S. Carnevale 2737 Devonshire Place, NW No. 514 Washington DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Population Reference Occupation Communications Director Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 08/09/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020032307

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Mitnick, Josselson, DePersia, De Persia 35 Kings Highway East Haddonfield NJ 08033	Name of Employer (Partnership)	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	SEE ATT RIBUTION BELOW	
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Harvey Mitnick 35 Kings Highway East Haddonfield NJ 08033	Name of Employer Mitnick Josselson et al.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	SEE ATT RIBUTION BELOW	
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Richard Josselson 35 Kings Highway East Haddonfield NJ 08033	Name of Employer Mitnick, Josselson et al.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	SEE ATT RIBUTION BELOW	
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Robert De Persia 35 Kings Highway East Haddonfield NJ 08033	Name of Employer Mitnick Josselson et al.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	SEE ATT RIBUTION BELOW	
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Rocco De Persia 35 Kings Highway East Haddonfield NJ 08033	Name of Employer Mitnick Josselson et al.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	SEE ATT RIBUTION BELOW	
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Gary L. Smith 20 Wellesley Road Upper Montclair NJ 07043	Name of Employer Cummings & Smith, Inc.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Businessman		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Gary L. Smith 20 Wellesley Road Upper Montclair NJ 07043	Name of Employer Cummings & Smith, Inc.	Date (month, day, year) 08/11/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Businessman		
Aggregate Year-to-Date > \$ 2000.00			
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

2000032308

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Christopher Bass 704 S. Bayview Avenue Seaside Park NJ 08752 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Warren Medical Associates Occupation Treasurer's Best Efforts Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Noah Bronkesh 5 Wexford Lane Linwood NJ 08221 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sills Cummis et al. Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert A. Epifano, Jr. 824 Summit Ridge Drive Bridgewater NJ 08807 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Epic, Inc. Occupation Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code John B. Feeley PO Box 448 Sea Isle City NJ 08243 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer First Eastern Realty Occupation Realtor Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Clifford Goldman 45 Nursery Road Titusville NJ 08560 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Consultant Occupation Goldman Beale Associates Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Edward S. Hochman, Esq. 225 East 57th Street New York NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Brian J. Kelly 11 Buttonwood Crosswicks NJ 08515 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Park Davis Pharmaceuticals Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020032309

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code John J. Lynch 36 Vista Drive Little Silver NJ . 07739 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Colleen M. McCann 100 Hiram Square New Brunswick NJ 08901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Consultant Occupation The MWW Group Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stacey J. Mobley 141 Deer Valley Lane Wilmington DE 19807 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer DuPont Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Alicia O'Donnell Walker 545 Clothier Springs Road Malvern PA 19355 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Packard Occupation Senior Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code William P. Rebarick 4 McGuirk Lane West Orange NJ 07052 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Siils Cummis et al. Occupation Administrative Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code M. Zev Rose 1741 Country Club Drive Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sherman Silverstein Kuhl Rose Podolsky Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code George E. Scharpf 3 Beaver Dam Road Colts Neck NJ 07722 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Amboy National Bank Occupation President & CEO Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200032310

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Leroy Schecter 55 Passaic Avenue Kearney NJ 07032	Name of Employer Marino Industries Corp.	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/Owner		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Leroy Schecter 55 Passaic Avenue Kearney NJ 07032	Name of Employer Marino Industries Corp.	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/Owner		
Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code John T. Tighe, III 245 Merion Road Merion PA 19066	Name of Employer TMG Healthcare, Inc.	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Dr. Azad Bhatt 2 Wilderness Drive Medford NJ 08055	Name of Employer Physician	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Atlantic Physical Medicine		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Kathy Bhatt 2 Wilderness Drive Medford NJ 08055	Name of Employer Self Employed	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Distributor		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Doner & Castro 540 N. Route 73 Berlin Township NJ 08091	Name of Employer (Partnership)	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	SEE ATTRIBUTION BELOW	
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Henry L. Doner 2 Kings Lane Voorhees NJ 08043 [MEMO ITEM]	Name of Employer Doner & Castro	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	SEE ATTRIBUTION BELOW	
Aggregate Year-to-Date > \$ 500.00			

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020032311

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Thomas F. Flynn, III 4 Greentree Center # 201 Marlton NJ 08053	Name of Employer Flynn Austin	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Dr. Neil Liebman 2123 Browing Road Pennsauken NJ 08110	Name of Employer Self	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Chiropractor		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Jeffrey McGunnigle 33 West Kings Highway Mount Ephraim NJ 08059	Name of Employer Self	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Chiropractor		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Michael P. Mullen 1301 Marlton Pike West Cherry Hill NJ 08002	Name of Employer Self Employed	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Dr. Larry A. Sabel 1 Aster Ct. Medford NJ 08055	Name of Employer Self	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Chiropractor		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Ron Saltiel 13 Harvest Lane Medford NJ 08055	Name of Employer CNS, Inc.	Date (month, day, year) 08/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Vice President		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Daniel T. Bossert R.D. #2, Box 402V Mullica Hill NJ 08062	Name of Employer Bowman & Company	Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Certified Public Accountant		
	Aggregate Year-to-Date > \$ 500.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200203312

20020032313

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	10 / 126
				FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code John F. Dailey, Jr. 5 Sherwood Lane Voorhees NJ 08043		Name of Employer Bowman & Co., LLP		Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Accountant			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Joseph J. Hoffmann 55 Summit Avenue Berlin NJ 08009		Name of Employer Bowman & Co., LLP		Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Accountant			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Nicholas M. Kouletsis 744 N. 22nd Street Philadelphia PA 19130		Name of Employer Pepper Hamilton		Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Stephen E. Ryan 12 Snowball Court Mt. Laurel NJ 08054		Name of Employer Treasurer's Best Efforts		Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Ralph R. Smith, III 18 Dogwood Avenue Glassboro NJ 08028		Name of Employer Pepper Hamilton, LLP		Date (month, day, year) 08/23/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Angelini Viniar & Freedman 70 Euclid Street Woodbury NJ 08096		Name of Employer (Partnership)		Date (month, day, year) 08/25/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Michael Angelini 70 Euclid Street Woodbury NJ 08096		Name of Employer Angelini, Viniar, & Freedman		Date (month, day, year) 08/25/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

20020032314

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	11 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code John Armano 19 Acorn Street Sicklerville NJ 08081		Name of Employer Law Office of William Hayes		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Robert J. Fitzpatrick 280 95th Street Stone Harbor NJ 08247		Name of Employer Abri Animal Hospital		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Veterenarian			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code John F. Hall, III 11 East Wilson Avenue Woodstown NJ 08098		Name of Employer E.I. DuPont		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Mech-Tech			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Mark Imbesi 81 Cumberland Avenue Estell Manor NJ 08319		Name of Employer Carpenter Realty		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Real Estate Manager			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Keith E. Johnson 70 Beal Road Elmer NJ 08318		Name of Employer Self		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Miccosukee Tribe PO Box 440021 Miami FL 33144		Name of Employer		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 500.00 PERMISSIBLE FUNDS
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Edward H. Salmon 43 Holly Way Bridgeton NJ 08302		Name of Employer AUS Consultants		Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation President			
		Aggregate Year-to-Date > \$ 2000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Samuel Klein & Company One Newark Center Newark NJ 07102	Name of Employer (Partnership)	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 350.00 SEE ATT RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code Joseph J. Faccone One Unami Lane Scotch Plains NJ 07076 [MEMO ITEM]	Name of Employer Samuel Klein & Company	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 350.00 SEE ATT RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CPA	Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code Arthur P. Schalick, Jr. 617 Quail Drive Millville NJ 08332	Name of Employer Schalick Grossman	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CPA	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Morton Sheikman 8 Club House Lane Boynton Beach FL 33436	Name of Employer Self	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Herman Tolz 3009 Shore Drive Villas NJ 08251	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Robert C. Waggoner 284 Boulevard Mountain Lakes NJ 07046	Name of Employer President/CEO	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Burrelle's Information Services	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Robert C. Waggoner 284 Boulevard Mountain Lakes NJ 07046	Name of Employer President/CEO	Date (month, day, year) 08/25/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Burrelle's Information Services	Aggregate Year-to-Date > \$ 2000.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Gus Andy Pittsburgh & Beach Aves. Cape May NJ 08204 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Treasurer's Best Efforts Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Gerald J. Batt 22 Evelyn Avenue Vineland NJ 08360 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lipman Antonelli et al. Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Benjamin Berkowitz, MD 11 Holly Way Bridgeton NJ 08302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Doctor Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Ronald Casella 607 Landis Avenue Vineland NJ 08360 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Casella & Casella Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Nicola Cinalli 81 Westminster Road Voorhees NJ 08043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer O'Donnell & Vacianto Occupation Engineer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Suzanne L. Dalton 518 W. Stafford Avenue Laurel Springs NJ 08021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Strategic Message Design Group Occupation Direct Mail Vendor Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 750.00
Full Name, Mailing Address, and ZIP Code Donald DeRossi Post Office Box 190 Vineland NJ 08360 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer DeRossi & Son Co. Occupation Owner Aggregate Year-to-Date > \$ 1250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020316

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Kimberly M. Downes 683 Town Bank Road Cape May NJ 08204 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Election Fund of James Whelan 3716 Boulevard Avenue Atlantic City NJ 08401 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00 PERMISSIBLE FUNDS
Full Name, Mailing Address, and ZIP Code John B. Feeley PO Box 448 Sea Isle City NJ 08243 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer First Eastern Realty Occupation Realtor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Douglas Fisher 654 Shiloh Pike Bridgeton NJ 08302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fisher Food Center Occupation Merchant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Robert J. Gallo 4 Light Horse Court Marlton NJ 08053 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer NJ-American Water Company Occupation President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Elizabeth V. Guaracini 4232 E. Landis Avenue Vineland NJ 08360 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Frank Guaracini, Jr. 4232 E. Landis Avenue Vineland NJ 08360 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Frank's Realty Co. Occupation Executive Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020032317

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Gregory Hieb 646 Bay Avenue Somers Point NJ 08244 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code N. Lynne Hughes 9 Bay Road Ocean NJ 08226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code William J. Hughes, Jr. 1019 Wesley Road Ocean City NJ 08226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer U.S. Department of Justice Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code James R. Iannone 5 71st Street Sea Isle City NJ 08243 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Freda Real Estate Occupation Realtor Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Matthew Iannone 236 N. Shore Road Beesleys Point NJ 08223 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Freda Real Estate Occupation Broker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Helen B. Innocente 547 Sunny Avenue Somers Point NJ 08244 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Thomas J. Innocente, Jr. 547 Sunny Avenue Somers Point NJ 08244 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Beasley's Point Sea Doo Occupation Owner Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20030318

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Richard R. Judge
100 Dobbs Lane
Suite 208
Cherry Hill NJ 08034

Name of Employer
United Compomers

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
CEO

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Edward W. Kennedy
5 Crestview Drive
Seaville NJ 08230

Name of Employer

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
CPA

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Wallace C. Laudeman
1017 Lafayette Street
Cape May NJ 08204

Name of Employer
Self

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

David W. Long
455 Cedarwood Drive
Vineland NJ 08360

Name of Employer
BP&H Supply

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
Sales

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Louis N. Magazzu
PO Box 812
Vineland NJ 08362

Name of Employer
Self

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
Computer Company Owner

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

John R. Maier
5105 N. Park Drive
Apartment S-1015
Pennsauken NJ 08109

Name of Employer
South Jersey Port Corp.

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
300.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
Executive

Aggregate Year-to-Date > \$ 300.00

Full Name, Mailing Address, and ZIP Code

Telly Moumas
6704 Washington Avenue
Egg Harbor Twp. NJ 08234

Name of Employer
Self

Date (month,
day, year)
08/29/1999

Amount of Each
Receipt this Period
250.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Occupation
Retired

Aggregate Year-to-Date > \$ 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020319

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Nancy C. Myers
25 Woodside Lane

Cinnaminson NJ 08077

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

QWIC, Inc.

Occupation

Construction Manager

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Charles E. Pessagano
PO Box 477

Cape May NJ 08204

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Ashok Pilly, MD
3039 Candlewood Drive

Vineland NJ 08360

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self

Occupation

Physician

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Raymond J. Zane Campaign Fund
131 Delaware Street

Woodbury NJ 08096

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

250.00

Occupation

PERMISSIBLE FUNDS

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Faye Salvatore
330 Heritage Road

Sewell NJ 08080

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Gloucester County

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

250.00

Occupation

Executive Director

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Alfred R. Scemi, Jr.
608 E. Pineview Drive

Galloway NJ 08201

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Self

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

500.00

Occupation

Attorney

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Charles Sloane, III
604 Quincy Court

Glassboro NJ 08028

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Name of Employer

Treasurer's Best Efforts

Date (month, day, year)

08/29/1999

Amount of Each Receipt this Period

250.00

Occupation

Aggregate Year-to-Date > \$ 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20003320

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Michael J. Voll PO Box 10 Cape May Courthouse NJ 08210	Name of Employer Schoor DePalma Occupation Vice President	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code John R. Walker PO Box 569 Ocean City NJ 08226	Name of Employer Walker Previti Homes & Assoc. Occupation Engineer	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Francis A. Witt 414 Delaware Avenue National Park NJ 08063	Name of Employer McKernan Architects Occupation Marketing Principal	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Nicholas Wulderk, Jr. 20 Marlton Road Woodstown NJ 08098	Name of Employer AON Occupation Analyst	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Committee to Elect Doughty PO Box 216 Cape May NJ 08210	Name of Employer Occupation	Date (month, day, year) 08/30/1999	Amount of Each Receipt this Period 500.00 PERMISSIBLE FUNDS
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Olive M. Bryan 45 Eggert Avenue Metuchen NJ 08840	Name of Employer Self Occupation Graphic Artist	Date (month, day, year) 09/07/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Victor Herlinsky, Jr. 50 Main Street Hackensack NJ 07601	Name of Employer Self Occupation Attorney	Date (month, day, year) 09/07/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

200200321

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Grover Connell 207 Watchung Fork Westfield NJ 07090 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Connell, Rice & Sugar Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Patricia Connell 207 Watchung Fork Westfield NJ 07090 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Thomas F. Flynn, III 4 Greentreet Center # 201 Marlton NJ 08053 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Flynn Austin Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Thomas F. Flynn, III 4 Greentreet Center # 201 Marlton NJ 08053 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Flynn Austin Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code G. Alvin Shpeen 45 Madison Avenue Pitman NJ 08071 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Arlene R. Gross Claridge House II Apt. 12HW Verona NJ 07044 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/26/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Steven E. Gross 49 Farley Road Short Hills NJ 07078 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Silis Cummis Law Offices Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 09/26/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003322

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Paul Waters Claridge House 1 Apt. 911 Verona NJ 07044	Name of Employer LJS Associates	Date (month, day, year) 09/26/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Developer		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Benjamin R. Barber 1019 River Road Piscataway NJ 08854	Name of Employer Rutgers University	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Frank G. Basile 424 Landis Avenue Vineland NJ 08360	Name of Employer Self	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Gorman & Rauh PO Box 157 Rio Grande NJ 08242	Name of Employer (Partnership)	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 250.00 SEE ATTRIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code John R. Rauh 159 Tyler Road Woodbine NJ 08270 [MEMO ITEM]	Name of Employer Gorman & Rauh	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 250.00 SEE ATTRIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Norma W. Hess 625 Park Avenue Apt. 9A New York NY 10021	Name of Employer Self	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Norma W. Hess 625 Park Avenue Apt. 9A New York NY 10021	Name of Employer Self	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 2000.00		
SUBTOTALS of Receipts This Page (Optional)			
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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (In Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Ronald E. Vaughn, Jr. 42 West Lafayette Street Trenton NJ 08608 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The Vaughn Collaborative Occupation Principal Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/28/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code David Hale 200 West 86th Street 18M New York NY 10024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Isabiz Limited Occupation Treasurer's Best Efforts Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Nancy Lieberman 200 West 86th Street 18M New York NY 10024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Phillips International Auctioneers Occupation Photography Specialist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Sheila McCann 150 Love Lane Bridgeton NJ 08302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Chance & McCann LLC Occupation Office Manager Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code The Kip's Castle Group 22 Crestmont Road Montclair NJ 07042 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/30/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Charles A. Stanziale 22 Crestmont Road [MEMO ITEM] Verona NJ 07044 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Schwartz Tobia Stanziale, et al Occupation Attorney Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 09/30/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert E. Murray 25 Sycamore Avenue Little Silver NJ 07739 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Murray Murray & Corrigan Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/04/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Robert E. Murray 25 Sycamore Avenue Little Silver NJ 07739	Name of Employer Murray Murray & Corrigan	Date (month, day, year) 10/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Sidney L. Brody 726 West Chestnut Terr Vineland NJ 08360	Name of Employer Self	Date (month, day, year) 10/05/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Developer/ Owner		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Geraldine Horn 15 Leddell Road Mendham NJ 07945	Name of Employer Self	Date (month, day, year) 10/08/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Sanford Luger 526 Lenox Avenue Westfield NJ 07090	Name of Employer Self	Date (month, day, year) 10/08/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Nazario Paragano 365 South Street Morristown NJ 07960	Name of Employer Paragano Management	Date (month, day, year) 10/08/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Ellen Samuel 526 Lenox Avenue Westfield NJ 07090	Name of Employer Self	Date (month, day, year) 10/08/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Harvey S. Moskowitz 7 Burlington Rd Livingston NJ 07039	Name of Employer Self	Date (month, day, year) 10/15/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

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20003325

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Rep. Herbert C. Klein 11 Brook Ridge Court Cedar Grove NJ 07009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Novell Amoroso Klein Bierman Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/17/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Rep. Herbert C. Klein 11 Brook Ridge Court Cedar Grove NJ 07009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Novell Amoroso Klein Bierman Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/17/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code James V. Tino 38 Hall Road Chatham NJ 07928 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Multi Chevrolet Occupation Sales Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/17/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Chuck L. Hardwick 1610 Beacon Lane Point Pleasant Bea NJ 08742 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pfizer Inc. Occupation Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/19/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Michael B. Tischman One Riverfront Plaza Newark NJ 07102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sills Cummis Radin Tischman Epstein & Occupation Lawyer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/19/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code James C. Hudson 1525 Classen Drive Oklahoma City OK 73106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sonic Corp & Subsidiaries Occupation President & CEO Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Leslie S. Hudson 1525 Classen Drive Oklahoma City OK 73106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Semi-Retired Epidemiologist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/21/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Lester Z. Lieberman 1500 Mt. Kemble Avenue Morristown NJ 07960 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lester Z. Lieberman, PE Occupation Engineer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Lester Miller, Esq. 400 38th Street Union City NJ 07087 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Lester Miller, Esq. 400 38th Street Union City NJ 07087 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Theodora Drakopoulou PO Box 341 Hoboken NJ 07030 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer SCBase Inc Occupation Senior Consultant Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/25/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Edward S. Hochman, Esq. 225 East 57th Street New York NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/25/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Ann E. Koeppe 8 Colonial Court Skillman NJ 08558 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer None Occupation Unemployed Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/25/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Edward Breen 100 Post Kennel Rd Far Hills NJ 07931 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer David Berman, P.C. Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Michael T. Dwyer, III 287 Roseland Ave Essex Fells NJ 07021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bleakley, Dwyer, Schwartz, Cooney & F Occupation Financial Planning Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Francis J. Elerio 26 Claremont Ave Cliffside Park NJ 07010 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Go America Communications Occupation CFO Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code James G. Gibson 58 Lyons Place Basking Ridge NJ 07920 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Gibso-Tube Occupation Engineer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Kevin McCloskey 40 Manor Avenue Cranford NJ 07016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Dr. Vince McGlone 325 Hobart Ave Short Hills NJ 07078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Optometrist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Perlman & Perlman 220 Fifth Avenue New York NY 10016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/28/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Clifford Perlman 220 Fifth Ave [MEMO ITEM] New York NY 10016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Perlman & Perlman Occupation Lawyer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/28/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
SUBTOTALS of Receipts This Page (Optional)			
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SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Seth Perlman 220 Fifth Ave New York NY 10016 [MEMO ITEM]	Name of Employer Perlman & Perlman Occupation Lawyer	Date (month, day, year) 10/28/1999 SEE ATT	Amount of Each Receipt this Period 250.00 RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Marc N. Pindus 195 Paterson Ave Little Falls NJ 07424	Name of Employer Self Occupation Financial Advisor	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code Consuelo L. Silbert 65 Highlands Ave Springfield NJ 07081	Name of Employer Self Occupation Retired	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code Victor K. Soffer 11 Penn PLaza Suite 2101 New York NY 10001	Name of Employer Self Occupation Lawyer	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code William J. Soriano 27 Bradford Terrace Boonton NJ 07005	Name of Employer Soriano, Henkel, Salerno, Biehl & Mat Occupation Attorney	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code William C. Steere 235 East 42 Street New York NY 10017	Name of Employer Pfizer, Inc. Occupation Chairman	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Ronald F. Tuosto 9 Northshore Court Skillman NJ 08558	Name of Employer RR Donnelley Occupation Print Sales	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

2002329

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Albert R. Van Riper, III 5 Woodside Drive PO 555 Montville NJ 07045	Name of Employer A.R. Van Riper Jr. Inc	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation School Bus Contractor		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Scott A. Weiner 80 Sayre Drive Princeton NJ 08540	Name of Employer Sithe Energies	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Executive		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Scott A. Weiner 80 Sayre Drive Princeton NJ 08540	Name of Employer Sithe Energies	Date (month, day, year) 10/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Executive		
	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Laurence M. Downes PO Box 1464 Wall NJ 07719	Name of Employer NJ Resources Corporation	Date (month, day, year) 10/30/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CEO		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code E. James Ferland 6 Parkwood Lane Mendham NJ 07945	Name of Employer Public Service Electric And Gas Company	Date (month, day, year) 10/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CEO		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Douglas E. Johnson 13 Captains Court Manasquan NJ 08736	Name of Employer First Union National Bank	Date (month, day, year) 10/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Banker		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Gerry E. Goodrich 255 West 90th Street, Apt 11C New York NY 10024	Name of Employer Saint Barnabas Health Care System	Date (month, day, year) 11/01/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Cardiologist		
	Aggregate Year-to-Date > \$ 500.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020330

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Sylvia L. Steiner 75 Eisenhower Parkway Roseland NJ 07068 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Allan Feldman 51 Christy Drive Warren NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Able Office Products Corp. Occupation Executive Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/02/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Sidney L. Hofing 928 West State Street Trenton NJ 08618 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The Eagle Group Occupation Partner Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/02/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Frank X. Keegan 605 Cherokee Lane Brielle NJ 08730 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Paine Webber Inc Occupation Financial Advisor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/02/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Richard L. Eland 4 Courtney Drive Princeton Junction NJ 08550 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sharpe Title Inc Occupation Vice President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/03/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Omar Boraie 8 Desmet Avenue Milltown NJ 08850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Boraie Realty Occupation Sales Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Omar Boraie 8 Desmet Avenue Milltown NJ 08850 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Boraie Realty Occupation Sales Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200200331

20003332

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	29 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Samer Boraie 8 Desmet Avenue Milltown NJ 08850		Name of Employer Ameco Industries		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Sales			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Samer Boraie 8 Desmet Avenue Milltown NJ 08850		Name of Employer Ameco Industries		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Sales			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Wasseem Boraie 8 Desmet Avenue Milltown NJ 08850		Name of Employer Boraie Realty		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Sales			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Wasseem Boraie 8 Desmet Avenue Milltown NJ 08850		Name of Employer Boraie Realty		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Sales			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Timothy T. Brock 32 Walbrooke Road Scarsdale NY 10583-2744		Name of Employer Satteree & Brock		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Donald M. Curry 757 Kimball Avenue Westfield NJ 07090		Name of Employer Horizon Blue Cross Blue Shield		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Executive			
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Willie E. Dennis 417 West 146 Street, Apt. 1 New York NY 10031		Name of Employer Camhy Karlinsky & Stein		Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

DiTorrice Associates
24 Kirkpatrick Street

New Brunswick NJ 08901

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
(Partnership)

Occupation

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
500.00

SEE ATTRIBUTION BELOW

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Joe DiTorrice
14 Woodmere Rd

North Brunswick NJ 08901

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
DiTorrice Associates

Occupation
Owner, Financial Planner

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
500.00

SEE ATTRIBUTION BELOW

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Blair Duncan
213-14 Union Turnpike

Bayside NY 11364

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
North General Hospital

Occupation
General Counsel

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Robin S. Gannon
1711 Beverly Avenue

Spring Lake NJ 07762

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Self

Occupation
Housewife

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Leslie E. Goodman
8 Rosenberry Court

Lawrenceville NJ 08648

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
The Eagle Group

Occupation
Executive Vice President

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Sidney L. Hofing
928 West State Street

Trenton NJ 08618

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
The Eagle Group

Occupation
Partner

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Rita J. Terracciano
314 Crescent Parkway

Sea Girt NJ 08750

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Self

Occupation
Homemaker

Date (month,
day, year)
11/04/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

2002333

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Rita J. Terracciano 314 Crescent Parkway Sea Girt NJ 08750 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jerold L. Zaro 9 Brook Drive Ocean NJ 07712 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Ansell Zaro Grimm & Aaron Occupation Attorney Aggregate Year-to-Date > \$ 1900.00	Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 800.00
Full Name, Mailing Address, and ZIP Code Toni K. Zaro 9 Brook Drive Ocean NJ 07712 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/04/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Cynthia C. Wainwright Berger 1050 Park Avenue New York NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Chase Manhattan Bank Occupation Corporate Philanthropist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stephen Berger 1050 Park Avenue New York NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Odyssey Investment Partner, LLC Occupation Chairman Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Osman A. Boraie 24 DeBonis Drive Milltown NJ 08850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Boraie Realty Occupation R.E. Broker Asso. Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Osman A. Boraie 24 DeBonis Drive Milltown NJ 08850 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Boraie Realty Occupation R.E. Broker Asso. Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200200334

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Daniel Capriotti
31 Hickory Street

Metuchen NJ 08840

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
150.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

John A. Clarke
55 Suydam Street

New Brunswick NJ 08901

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Sarah F. Clarke
305 So 3rd Avenue

Highland Park NJ 08904

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

New Brunswick Development Corp

Occupation

Vice President

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

John A. Covello
93 Glen Rock Road

Cedar Grove NJ 07009

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

United Water

Occupation

Manager

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Terrence Cunningham
44 Maple Avenue

West Orange NJ 07052

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Terrence Cunningham
44 Maple Avenue

West Orange NJ 07052

Receipt For: ☐ Primary ☒ General
☐ Other (specify) :

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 2000.00

Full Name, Mailing Address, and ZIP Code

Louis Cyktor, Jr.
100 Woodbridge Ctr Dr, Suite 301

Woodbridge NJ 07095

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer

Treasurer's Best Efforts

Occupation

Date (month,
day, year)
11/05/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020335

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Ulises Diaz 1505 85th Street North Bergen NJ 07047 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Matthew Doherty 32 MacArthur Drive Edison NJ 08837 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sunbelt Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Christiana Foglio 3 Cobb Road New Brunswick NJ 08901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Home Properties Occupation Real Estate Broker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Warren R. Gerleit 8 Fleming Ct Long Valley NJ 07850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jean A. Holtz 74A De Levan Street Lambertville NJ 08530 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer New Brunswick Development Corp Occupation Public Relations Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Deborah La Rose 41 Kimberly Court Sparta NJ 07871 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Michael J. La Rose 41 Kimberly Court Sparta NJ 07871 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Trilleck Inc Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

2002003336

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Dennis Marco 36 Howard Street Wyckoff NJ 07481 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blue Cross Blue Shield Occupation Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joshua Markowitz 5 Twinning Lane West Trenton NJ 08628 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stacey Markowitz 5 Twinning Lane West Trenton NJ 08628 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joseph McNamara 89 Stillwell Road Leonardo NJ 07737 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer NJ Laborers International Union Occupation Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Joseph H. Moeller 2 World Trade Center New York NY 10001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Keith Brea and Wood Occupation Investment Banker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Zaida Neillands 357 Pleasant Lane Haworth NJ 07641 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Christopher J. Paladino 18 Spyglass Road Skillman NJ 08558 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer New Brunswick Dev. Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003337

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Robert G. Paulus 186 Phalanx Road Colts Neck NJ 07722 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Pisarri, McEnroe, & Careri 126 State Street Hackensack NJ 07601 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Vijay N. Roy 8 Foxboro Road Wayne NJ 07470 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joseph Simunovich 725 Holly Ct Norwood NJ 07648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer United Water Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Norman Tanzman 100 Woodbridge Ctr Dr Woodbridge NJ 07095 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Jacobson, Goldfard, & Tanzman Occupation Real Estate Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Carl E. VanHorn 414 S. First Ave Highland Park NJ 08904 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Rutgers Occupation Teacher Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Christine M. Zoffinger 3 Rock Run East Windsor NJ 08520 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Constellation Capital Group Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/05/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page.

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Joseph M. Jacobs 1415 Penrose Ave Atlantic City NJ 08401 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Jacobs & Jacobs Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/06/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Andrew M. Senchak 100 Knollwood Road Short Hills NJ 07078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Keefe Bruyertz Woods Occupation Banker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/06/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Barbara D. Senchak 100 Knollwood Road Short Hills NJ 07078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/06/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Steven P. Perskie 7511 Bayshore Drive Margate NJ 08402 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fox, Rothschild, O'Brien & Frankel Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/07/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stanley P. Strauss 52 Crest Drive South Orange NJ 07079 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Skinder Strauss Assoc. Occupation Publishing Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/07/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Brig. Gen. Preston M. Taylor, Jr. 6 Caitlin Court Mount Holly NJ 08060 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden City Occupation Business Administrator Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/07/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Nancy H. Cosentino 14 Lupine Lane Titusville NJ 08560 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer None Occupation None Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 250.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Stephanie G. Harris 163 Hopewell-Wertsville Road Hopewell NJ 08525 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Farmer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Richard L. Huberman 1316 New Hampshire Ave, NW Apt. 204 Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupational Safety and Health Review Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Lynn D. Johnston 48 Elm Ridge Road Pennington NJ 08534 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Johnston Associates Occupation Financial Advisor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dennis Meheil 115 Stevens Avenue Valhalla NY 10595 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sweetheart Cup Company Occupation CEO Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Robert Slater 301 South Livingston Ave Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer LRF Slater Companies Occupation Developer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Scott L. Slesinger 3813 Kenilworth Drive Chevy Chase MD 20815 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Environmental Technology Council Occupation Vice President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Nelson Blitz 907 Fifth Avenue New York NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Thomas Carver 102 Tuttle Ave Spring Lake NJ 07762	Name of Employer The Carver Group Occupation Sole Proprietor	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code David R. Case 5502 Pollard Road Bethesda MD 20816	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Joseph L. Farina 62 Tintle Road Kinnelon NJ 07405	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Thomas B. Harvey 40 Cranbury Neck Road Cranbury NJ 08512	Name of Employer Self Occupation Attorney	Date (month, day, year) 11/11/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Ann Damsgaard 11 Morven Place Princeton NJ 08540	Name of Employer Self Occupation Pharmacist	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Elizabeth C. Dilworth 141 Hodge Road Princeton NJ 08540	Name of Employer Self Occupation Retired	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Landon Y. Jones 20 Hibben Road Princeton NJ 08540	Name of Employer Treasurer's Best Effort's Occupation	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Sarah B. Jones 20 Hibben Road Princeton NJ 08540	Name of Employer Princeton University	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Computer Technician	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Morton Goldfein 50 East 89th Street New York NY 10128	Name of Employer Self	Date (month, day, year) 11/13/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Samuel M. Hamill, Jr. 146 Carter Road Princeton NJ 08540	Name of Employer Self	Date (month, day, year) 11/13/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Regional Planner	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Dr. Young B. Lee 7 Pine Acres Drive Medford NJ 08055	Name of Employer Self	Date (month, day, year) 11/13/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Neurologist	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Mary A. Moran 243 Locust Ave Westmont NJ 08108	Name of Employer Pepco	Date (month, day, year) 11/13/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Joseph Tarquini One Orchard Drive Berlin NJ 08009	Name of Employer The Tarquini Organization	Date (month, day, year) 11/13/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Architect	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Susan R. Chalfin 70 East 10 Street New York NY 10003	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 11/14/1999	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 400.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Marlene Doyle 10 Cleveland Lane Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Neurosurgeon Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Lila B. Lohr 624 The Great Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Princeton Day School Occupation School Administrator Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Ann P. McGoldrick 25 Vandeventer Ave Princeton NJ 08542 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Jung H. Cho PO Box 4608 Cherry Hill NJ 08034 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden County Health Officer Occupation Health Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Seth M. Glickenhau 100 Dorchester Road Scarsdale NY 10583 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Glickenhau & Co. Occupation Investment Management Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Anthony W. Greenberg 164 Hunt Drive Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lawrenceville School Occupation Teacher Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Anthony W. Greenberg 164 Hunt Drive Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lawrenceville School Occupation Teacher Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
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SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Geraldine Horn 15 Leddell Road Mendham NJ 07945 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code William M. Roth 5073 Province Line Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Caren V. Sturges 605 Herrontown Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer None Occupation None Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Donald Wilson 4574 Province Line Blvd Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Donald Wilson 4574 Province Line Blvd Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Susan N. Wilson 4574 Province Line Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Educator Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Susan N. Wilson 4574 Province Line Road Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Educator Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 11/15/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Diane D. Drobnis 3071 Lawrenceville Road Lawrenceville NJ 08648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Farmer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Leon E. Rosenberg 3071 Lawrenceville Road Lawrenceville NJ 08648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Princeton University Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Camden International Commodities Terminal, LLC 1200 Ferry Avenue Camden NJ 08104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/17/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Gary Mahon 1200 Ferry Ave Camden NJ 08104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden Int'l Commodities Terminal, LLC [MEMO ITEM] Occupation Partner Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/17/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Jeffrey Wheeler 1200 Ferry Ave Camden NJ 08104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden Int'l Commodities Terminal, LLC [MEMO ITEM] Occupation Partner Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/17/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Albert F. Daniels, Jr. 318 3rd Avenue Blue Anchor NJ 08037 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Albert F. Daniels Inc. Occupation Wood Panel Mfg Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/17/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Albert F. Daniels, Sr. 318 Third Avenue Blue Anchor NJ 08037 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Albert F. Daniels Inc Occupation Wood Panel Mfg Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/17/1999	Amount of Each Receipt this Period 1000.00
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NAME OF COMMITTEE (In Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Kenneth Jaffe 11 Ebersbach Lane Roseland NJ 07068		Name of Employer Kenneth Jaffe, Inc		Date (month, day, year) 11/17/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Advertising			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code John S. Kennedy 717 Dettmar Terr Runnemede NJ 08078		Name of Employer Parker, McCay & Criscuolo		Date (month, day, year) 11/17/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Daniel J. Ragone 26 Ellis Street Haddonfield NJ 08033		Name of Employer Self		Date (month, day, year) 11/17/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Anthony R. Alberto 728 Black Horse Pike Turnersville NJ 08012		Name of Employer Self Employed		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Builder/Developer			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Patricia Alberto 189 Pitman Downer Road Sewell NJ 08080		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Homemaker			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code John L. Bantivoglio 1500 South 6 Street Camden NJ 08104		Name of Employer Camden Trans Middle		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Owner			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Noah Bronkesh 5 Wexford Lane Linwood NJ 08221		Name of Employer Sills Cummis et al.		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

20020032347

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	44 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Stephen Edelstein 10 James Street Florham Park NJ 07932		Name of Employer Schwartz & Edelstein		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Kathleen Higgins 8 Red Oak Court Voorhees NJ 08043		Name of Employer Higgins, Long, & Bonfiglio		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Paralegal/ Office Manager			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Doreen Lacatena 317 Westmont Ave Haddonfield NJ 08033		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Homemaker			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Michael Lacatena 317 Westmont Avenue Haddonfield NJ 08033		Name of Employer Ragone Raible Lacatena & Boppel		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Certified Public Accountant			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code John H. Lucas 25 Eyrus Avenue Pitman NJ 08071		Name of Employer B&L Properties		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Self Employed			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code R. Page Lyons 2500 Broadway, #17 Camden NJ 08104		Name of Employer Tri State Bulk Handling Inc		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Pres. & CEO			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Colleen A. Maier 702 Winding Way Westville NJ 08093		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Lawyer			
		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Muriel J. Mansmann 468 White Horse Pike Atco NJ 08004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Maressa Goldstein Law Offices Occupation Legal Secretary Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ronald G. Mills 1811 Haddonfield Berlin Road Cherry Hill NJ 08003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Real Estate Sales Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Judith Pliner PO Box 160 Atco NJ 08004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Pliner Inc Occupation Administrative Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Donald H. Rainear 3 Franklin Street Bridgeton NJ 08302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Maury B. Reiter 303 Pheasant Hill Drive Bryn Mawr PA 19010 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Kaplin, Stewart, Meloff, Reiter & Stei Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Shaffer, Bonfiglio, Scerni, and D'Elia LLC 921 Pleasant Valley Avenue, 2 Fl PO Box 1258 Mount Laurel NJ 08054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/18/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Hal J. Shaffer 24 Manning Lane Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/18/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	46 / 126
				FOR LINE NUMBER 11A1	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Shaffer, Bonfiglio, Scemi, and D'Elia LLC 921 Pleasant Valley Avenue, 2 FI PO Box 1258 Mount Laurel NJ 08054		Name of Employer (Partnership)		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Hal J. Shaffer 24 Manning Lane Cherry Hill NJ 08003 [MEMO ITEM]		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Shaffer, Bonfiglio, Scemi, and D'Elia LLC 921 Pleasant Valley Avenue, 2 FI PO Box 1258 Mount Laurel NJ 08054		Name of Employer (Partnership)		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 1500.00			
Full Name, Mailing Address, and ZIP Code Alfred R. Scemi, Jr. 608 E. Pineview Drive Galloway NJ 08201 [MEMO ITEM]		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Shaffer, Bonfiglio, Scemi, and D'Elia LLC 921 Pleasant Valley Avenue, 2 FI PO Box 1258 Mount Laurel NJ 08054		Name of Employer (Partnership)		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Alfred R. Scemi, Jr. 608 E. Pineview Drive Galloway NJ 08201 [MEMO ITEM]		Name of Employer Self		Date (month, day, year) 11/18/1999	Amount of Each Receipt this Period 500.00 SEE ATT RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney			
		Aggregate Year-to-Date > \$ 1500.00			
Full Name, Mailing Address, and ZIP Code Bishan Agrawal 85 Rockwell Circle Marlboro NJ 07746		Name of Employer Telcordia		Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Engineer			
		Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Ved P. Chaudhary 22 Jackie Drive Morganville NJ 07751	Name of Employer Telecordia Tech Occupation Owner	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Norman S. D'Souza 1 N Reading Road Edison NJ 08817	Name of Employer Silverline Technologies Inc Occupation Accounting	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Barin Desai 495 King George Road Basking Ridge NJ 07920	Name of Employer Self Occupation Physician	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Manpreet Kapadia 54 Bond Street Bridgewater NJ 08807	Name of Employer Self Occupation Contractor	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code James C. Kellogg Box 317 Morristown NJ 07963	Name of Employer Community Foundation of New Jersey Occupation President	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Rajiv Malhotra 53 White Oak Drive Princeton NJ 08540	Name of Employer Self Occupation Retired	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Nilesh Mehta 259 Amherst Ave Colonia NJ 07067	Name of Employer Premier Medical Corporation Occupation President	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 400.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003350

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Ramesh C. Paliwal 16 David Street Ocean NJ 07712 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AT&T Occupation Engineer Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Ilaxiben A. Patel 5 Jackie Drive Morganville NJ 07751 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Store Owner Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Yaswant H. Patel 822 North Wood Avenue Linden NJ 07036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code Mihir Shah 53 Knightsbridge Road Piscataway NJ 08854 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Silverline Tech Occupation Financial Analyst Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Rajul Shah 124 Childs Road Basking Ridge NJ 07920 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lucent Tech Occupation Analyst Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Meena R. Shukla 38 Quail Run Warren NJ 07059 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Perfume Company Owner Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Meena R. Shukla 38 Quail Run Warren NJ 07059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Perfume Company Owner Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 500.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

2000032351

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Surendra Pal Singh 4 Conestoga Drive Medford NJ 08055 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer State of NJ Occupation Engineer Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Leelaram Srinvasulu 15 Hyacinth Drive Fords NJ 08863 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Silverline Technologies, Inc. Occupation Software Engineer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ravi Subramanian 1540 Edly Cove Court North Brunswick NJ 08902 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Silverling Occupation Business Chairman Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ravi Subramanian 1540 Edly Cove Court North Brunswick NJ 08902 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Silverling Occupation Business Chairman Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Sharad Trivedi 1805 Merrywood Drive Edison NJ 08817 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Amsha Intl. Inc Occupation Business Owner Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Sharad Trivedi 1805 Merrywood Drive Edison NJ 08817 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Amsha Intl. Inc Occupation Business Owner Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Uday S. Varma 1206 Green Hollow Drive Iselin NJ 08830 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Engineer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 250.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200200332

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Vijay Varma 23 Snowdrift Drive Piscataway NJ 08854 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AHP Occupation Engineer Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 11/20/1999	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code Asit Dave 25 Heritage Drive Green Brook NJ 08812 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Asit Tony Dave Realty Inc Occupation Realtor Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 11/21/1999	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code Dr. Chitra Kumar 5311 Blvd E West New York NJ 07093 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/21/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Hemant Patel 1 West Drive Edison NJ 08820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/21/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Paul R. Rajan, Esq. 1419 Oaktree Road Iselin NJ 08830 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/21/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code John M. Tsimbinos 238 Clent Road Great Neck NY 11021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Roslyn Savings Bank Occupation Vice Chairman Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Carmela Barton One Mountain Court Bedminster NJ 07921 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bernards Twp Police Occupation Crossing Guard Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/23/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Diane D. Drobnis 3071 Lawrenceville Road Lawrenceville NJ 08648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Farmer Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 11/25/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Mark Fisch 29 Mountain Ridge Dr Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Steven Fisch 61 Hemlock Rd Short Hills NJ 07078 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Continental Properties Occupation Real Estate Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joseph Cayre 16 East 40th Street New York NY 10016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Goodtimes, Inc. Occupation Manufacturer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Judith M. Lieberman Spring Valley Road Morristown NJ 07960 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Maureen Marshall 641 Prospect Ave Little Silver NJ 07739 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Red Bank Title Insurance Occupation Title Insurance Producer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Richard E. Marshall 641 Prospect Avenue Little Silver NJ 07739 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/29/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code James Aaron 10 Muncy Dr West Long Branch NJ 07764 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Ansell, Zaro, Grimm & Aaron Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Robert F. Age! 30 Amanda Lane Howell NJ 07731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Coastal Title Agency Inc Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Michael Barry 5 Marine View Plaza, Suite 500 Hoboken NJ 07030 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Applied Development Co Occupation Real Estate Developer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Marianthe Louise Budike 506 Georgetown Rd Wallingford PA 19086 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurers Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Sheila Cuccinelli 201 Route 17 North Suite 300 Rutherford NJ 07070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Edward J. Dauber 1474 Windsor Road Teaneck NJ 07666 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Greenberg, Dawber, Epstein, & Tucker Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Albrecht P. Engel 93 Douglas Road Glen Ridge NJ 07028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sysra Consulting Corp. Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Meyer Gold 8557 Bustleton Ave Philadelphia PA 19152	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Harold Greenspan 404 Maple Street Deal NJ 07723	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Walter L. Harris 348 35th Street S. Brigantine NJ 08203	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Earl T. Ingarfield 55 Technology Drive Lowell MA 01851	Name of Employer Avid Sports Wear Occupation Chairman	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Earl T. Ingarfield 55 Technology Drive Lowell MA 01851	Name of Employer Avid Sports Wear Occupation Chairman	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Kenneth T. Lin 7 Orchard Rd Piscataway NJ 08854	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Christos Mourtos 54 Bradford Way Voorhees NJ 08043	Name of Employer JCBG Inc Occupation Rest. Owner	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
SUBTOTALS of Receipts This Page (Optional)			
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20020032357

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Jeffrey Nadell 109 Princeton Oval Freehold NJ 07728		Name of Employer K. Hounanian		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney		Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Michael O'Connell 340 Washington Ave Avon NJ 07717		Name of Employer Coastal Title Agency Inc		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Antonis F. Pantazopoulos 8115 Accomac Rd Wyncote PA 19095		Name of Employer Mill Industries Mgt Corp		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive & Bus Owner		Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Spiros N. Poulimenos 607 Goshen Road Newtown Square PA 19073		Name of Employer Astra Foods Inc		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Self Employed		Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Jeffries Shein 30 Huntley Road Holmdel NJ 07733		Name of Employer JG& T Management Company		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Real Estate Broker		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Michael J. Sniffen 49 Drum Hill Dr Summit NJ 07901		Name of Employer Atlantic Health System		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Health Care Executive		Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code The Kip's Castle Group 22 Crestmont Road Montclair NJ 07042		Name of Employer (Partnership)		Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 500.00 SEEKING ATTRIBUTION
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation		Aggregate Year-to-Date > \$ 1000.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Demosthenes Vasilou 5 Chapel Circle Broomall PA 19008 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Astra Foods Occupation Food Sales Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Caryn Joi Bailey 417 West 146 Street, Apt 1 New York NY 10031 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Caryn Joi Bailey 417 West 146 Street, Apt 1 New York NY 10031 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Martin S. Begun 909 Third Avenue New York NY 10003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner & Harding Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David J. Callard 1120 Fifth Ave New York NY 10128 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Wand Partners Occupation Private Investment Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Don Casey 444 Washington Blvd Jersey City NJ 07310 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer New Jersey Nets Occupation NBA Coach Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Chelsfield Westbury, LLC 400 Park Avenue New York NY 10003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Glenn A. Clouser
701 Adams Street

Hoboken NJ 07030

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Fischbein Badillo Wagner & Harding

Occupation
Attorney

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Donald N. David
909 Third Ave

New York NY 10022

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Fischbein Badillo Wagner & Harding

Occupation
Attorney

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Davidoff & Malito LLP
605 Third Ave

New York NY 10158

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
(Partnership)

Occupation

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
1000.00
SEE ATTRIBUTION BELOW

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Sid Davidoff
605 3rd Avenue

New York NY 10158

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Davidoff & Malito, LLP

Occupation
Attorney

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
500.00
SEE ATTRIBUTION BELOW

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Howard Druckman
605 3rd Avenue

New York NY 10158

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Davidoff & Malito, LLP

Occupation
Attorney

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
500.00
SEE ATTRIBUTION BELOW

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Samuel Davis
375 Cedar Lane

Teaneck NJ 07666

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Davis, Saperstein & Solomon

Occupation
Lawyer

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Daniel Dougherty
935 Garden Street

Hoboken NJ 07030

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Tarpin Scurry

Occupation
Investor

Date (month,
day, year)
12/01/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Harry J. Fenzel 71 MacCulloch Ave Morristown NJ 07960 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bessmer Trust Occupation Investor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert Gamba 60 Beachmont Terrace North Caldwell NJ 07006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jackie Gosin 82 Old Roaring Brook Road Mt. Kisco NY 10549 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Newmark & Co. Occupation Treasurer's Best Efforts Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Raymond B. Harding 3135 Johnson Ave, Apt 17H Riverdale NY 10463 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein, Badillo, Wagner & Harding Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Leslie Heller 909 3rd Ave New York NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Psychotherapist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Howard B. Hornstein 203 East 72 Street New York NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein, Badillo, Wagner & Harding Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Bruce J. Jacobson 66 Finch Drive Roslyn NY 11576 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer People Care Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Harvey Josephson 800 Palisade Ave Fort Lee NJ 07024	Name of Employer Sarinsky Josephson Occupation CPA	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Michael J. Lazar 419 Park Avenue South New York NY 10016	Name of Employer Cambridge Lazar (real estate) Occupation President	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Raymond H. Levin One Main Street, Apt 12 B Brooklyn NY 11201	Name of Employer Fischbein Badillo Wagner & Harding Occupation Attorney	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Jerry J. Lewkowitz 116 W 32 Street New York NY 10019	Name of Employer People Care Occupation Lawyer	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Bartley F. Livolsi 89 Morris Lane Scarsdale NY	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Christopher Marothy 78 Ogden Ave White Plains NY 10605	Name of Employer Fishbein Badillo Wagner & Harding Occupation Attorney	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Jeffrey A. Mitchell 605 Park Ave, 9G New York NY 10021	Name of Employer Fischbein Badillo Wagner Harding Occupation Lawyer	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code William J. Mulrow 7 Northway Bronxville NJ 10708 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Gabelli Asset Management Occupation Investor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Hassan Nemazee 720 Fifth Avenue New York NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Nemazee Capital Corp Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Schonfeld & Weinstein, L.L.P. 63 Wall Street New York NY 10005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Joel Schonfeld 63 Wall Street New York NY 10005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Schonfeld & Weinstein, LLP [MEMO ITEM] Occupation Partner Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/01/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Gerald Schrager 909 3rd Avenue New York NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner & Harding Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Burton D. Strumpf 800 Washington Street Baldwin NY 11570 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner & Harding Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Alexander Wallach 17 Fox Run Road Pound Ridge NY 10576 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020302

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Andrew Weitzer 35 Bethune Street New York NY 10014 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Bruce H. Wiener 909 3rd Ave New York NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner Harding Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Bruce H. Wiener 909 3rd Ave New York NY 10022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner Harding Occupation Lawyer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/01/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code William E. Brooks 12 Sandy Lane West Trenton NJ 08628 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Regional Alliance for Contractors Occupation Constr. Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Ira D. Cohen PO Box 358 Alpine NJ 07620 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Updata Capital Occupation Investment Banker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Willie E. Dennis 417 West 146 Street, Apt. 1 New York NY 10031 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camhy Karlinsky & Stein Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Willie E. Dennis 417 West 146 Street, Apt. 1 New York NY 10031 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camhy Karlinsky & Stein Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200203303

20020032364

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code John J. Fahy 185 Ridge Road Rutherford NJ 07070		Name of Employer Waters McPherson Occupation Attorney		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Kristin Ann Halvey 115 Heights Road Ridgewood NJ 07450		Name of Employer Self Occupation Homemaker		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Martin E. Karlinsky 330 West End Ave, 11A New York NY 10023		Name of Employer Self Employed Occupation Treasurer's Best Efforts		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Martin E. Karlinsky 330 West End Ave, 11A New York NY 10023		Name of Employer Self Employed Occupation Treasurer's Best Efforts		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Alan T. Kessler 1325 Avenue of the Americas New York NY 10019		Name of Employer CDI Occupation		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Jacqueline Klein 11 Brook Ridge Ct Cedar Grove NJ 07009		Name of Employer Self Occupation Accountant		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code David M. Kushner 317 Madison Ave, Rm1100 New York NY 10017		Name of Employer Mercury Properties LLC Occupation Real Estate Investor		Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code David Mandelbaum 36 Ross Road Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mandelbaum & Mandelbaum Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David Mandelbaum 36 Ross Road Livingston NJ 07039 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mandelbaum & Mandelbaum Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Monica A Maron 528 Paxinosa Ave Easton PA 18042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Psychiatrist Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Mason, Taylor, & Colicchio 104 Carnegie Center, Suite 201 Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Philip M. Colicchio 104 Carnegi Ctr [MEMO ITEM] Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mason, Taylor, & Colicchio Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/02/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Paul C. Taylor 502 Carnegie Ctr, Suite 103 [MEMO ITEM] Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mason, Taylor & Colicchio Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/02/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Regina Law Massad 8 Dorchester Ct Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Regina Law Massad 8 Dorchester Ct Princeton NJ 08540	Name of Employer Self	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Housewife	Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Anthony D. Nini 14 Gail Ct Robbinsville NJ 08691	Name of Employer Kelly Massad LLP	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CPA	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Carl D. Poplar 215 Fries Mill Road Turnersville NJ 08012	Name of Employer Poplar & Eastlack	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Joseph P Riccardo 311 Sweetbriar Court Franklin Lakes NJ 07417	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Ronald J. Sacco 73 Alexandri Drive Manalapan NJ 07726	Name of Employer Kelly Massad LLP	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Accountant	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Lenore S. Sagner 651 W. Mt. Pleasant Ave, Suite 220 Livingston NJ 07039	Name of Employer Self	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Andrew J. Stamelman 6 Knightsbridge Drive Randolph NJ 07869	Name of Employer Riker Danzig Scherer Hyland & Perretti	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Mr. Jaime M. Weiss Treasurer's Best Efforts Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 1000.00
	Occupation Real Estate		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Wayne Zuckerman 36 Delsea Drive Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/02/1999	Amount of Each Receipt this Period 500.00
	Occupation Builder		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Robert L. Bildner 122 Upper Mountain Ave Montclair NJ 07042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer RLB Food Distr.	Date (month, day, year) 12/03/1999	Amount of Each Receipt this Period 1000.00
	Occupation President		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Pradeep S. Ghia 4320 Tiffany Dr Easton PA 18045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer 2 Rivers Cardiology Associates	Date (month, day, year) 12/03/1999	Amount of Each Receipt this Period 1000.00
	Occupation Doctor		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Gloucester County First 144 Glover Street Mullica Hill NJ 08062 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Non-Federal PAC	Date (month, day, year) 12/03/1999	Amount of Each Receipt this Period 500.00 PERMISSIBLE FUNDS
	Occupation		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Ronald P. Goldfaden 19 Aspen Drive Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 12/03/1999	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Stephen B. Wiley 250 Madison Ave Morristown NJ 07960 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Wiley Halehorn & Sirota	Date (month, day, year) 12/03/1999	Amount of Each Receipt this Period 1000.00
	Occupation Lawyer		
Aggregate Year-to-Date > \$ 1000.00			

SUBTOTALS of Receipts This Page (Optional)

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SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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**NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.**

Full Name, Mailing Address, and ZIP Code Lawrence Lucchino 8633 Ruelle Monte Carlo La Jolla CA 92037	Name of Employer San Diego Padres	Date (month, day, year) 12/04/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Owner		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Nancy Scappaticci 233 Bedford Road Ridgewood NJ 07450	Name of Employer Unemployed	Date (month, day, year) 12/06/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Alexander R. Baldwin, III 300 Central Park West, No. 1J New York NY 10024	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/07/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Thomas Gentile 44 Secor Lane Pelham Manor NY 10803	Name of Employer American Moving & Storage, Inc.	Date (month, day, year) 12/07/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation President		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Helene A. Sorin 47 Delwick Lane Short Hills NJ 07078	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/07/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Lewis M. Weinstein 30 West 63rd Street, Apt 31N New York NY 10023	Name of Employer Public Health Research	Date (month, day, year) 12/07/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation President		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Jerry Montrose 1041 Third Avenue New York NY 10021	Name of Employer SEFCO Corp.	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Director		
	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

2000332308

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Arthur T Murphy, Jr. 10 Northern Avenue Bronxville NY 10708 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer First Albany Corp. Occupation Senior Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jonathan A. Ballan 501 East 79 Street New York NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Fischbein Badillo Wagner & Harding Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Richard Edelin PO Box 30 Alpine NJ 07620 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Solovay, Edelin, & Eiseman Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Frank J. Franzino, Jr. 9 Engle Street Cresskill NJ 07626 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Shatz Meyer Franzino Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Jeffrey A. Mayer 29 Cambridge Way Alpine NJ 07620 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bear Stearns & Co Occupation Bond Trader Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Marc S. Sherman 800 Fifth Avenue, Apt. 23C New York NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Investments Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Bruce L. Weitz 37 McGrath Drive Cresskill NJ 07626 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Scott Bellin 215 East 68 Street, Apt. 15V New York NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Thesco Benect, LLC Occupation Account Executive Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/10/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Wallace R. Barr 3 Fischer Road Linwood NJ 08221 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Park Place Entertainment Occupation Executive Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/11/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Edward K. Flynn 39 Hills Road Loundonville NY 12211 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer First Albany Corp Occupation Municipal Director Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/11/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Hugh M. Zimmers 721 Cornelia Place Philadelphia PA 19118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Architect Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/12/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Angelo Altadonia 2122 S. 19th Street Philadelphia PA 19145 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Phila District Council Carpenters Occupation Carpenter Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Mark A. J. Bojanowski 237 Market Streer Philadelphia PA 19106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer East End Company Occupation Real Estate Broker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Julie A. Botel 1765 Dolly Drive Vineland NJ 08361 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Vineland Public Schools Occupation Assistant Superintendent Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

2002032370

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Lawrence R. Botel
121 West 77 Street, Apt. 2

New York NY 10024

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Self

Occupation
Real Estate

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

George W. Braun
488 Glassboro Road

Woodbury Heights NJ 08097

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Self

Occupation
Retired

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Mark J. Brosso
146 Lemonton Way

Radnor PA 19087

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Health Market Science

Occupation
Sales

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
400.00

Aggregate Year-to-Date > \$ 400.00

Full Name, Mailing Address, and ZIP Code

John L. D'Intino, Jr.
1335 South 13th Street

Philadelphia PA 19147

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
Law Offices of John D'Intino, Jr.

Occupation
Attorney

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Silvio John DiMedio
119 Mt Laurel Road

Moorestown NJ 08057

Receipt For: ☐ Primary ☒ General
☐ Other (specify) :

Name of Employer
DiMedio and Company

Occupation
Investment Advisor

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Silvio John DiMedio
119 Mt Laurel Road

Moorestown NJ 08057

Receipt For: ☒ Primary ☐ General
☐ Other (specify) :

Name of Employer
DiMedio and Company

Occupation
Investment Advisor

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 1500.00

Full Name, Mailing Address, and ZIP Code

Steven A. Fishman
777 Passaic Avenue

Clifton NJ 07012

Receipt For: ☐ Primary ☒ General
☐ Other (specify) :

Name of Employer
Self

Occupation
Ins Sales

Date (month,
day, year)
12/14/1999

Amount of Each
Receipt this Period
250.00

Aggregate Year-to-Date > \$ 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

20020032371

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code James G. Gilbert 192 Maple Street Englewood NJ 07631 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Merrill Lynch Occupation First Vice President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stephen Hankin 437 North Thurlow Ave Margate City NJ 08402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Hankin Dandson & Sandman Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Eric Lavdas 1902 Chestnut Circle Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Alan H. Schorr & Associates Occupation Lawyer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Lomax Partnership Post Office Box 24 Hilltown PA 18927 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer (Partnership) Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/14/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. Walter P. Lomax, Jr. Box 24 Hilltown PA 18927 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The Lomax Companies Occupation Physician Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Gary Mauro 55 Monroe Ave Roseland NJ 07068 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Rosenfarb, Winters & Co Occupation CPA Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Phillip McFillin 2120 Pine Street Philadelphia PA 19103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Phillip McFillin 2120 Pine Street Philadelphia PA 19103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert R. McMurtie 3 Lagoon Court Brigantine NJ 08203 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Financial Consultant Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Domenick J. Nardi 2800 Darby Road Havertown PA 19083 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Builder Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Louis J. Orocofsky 830 South Street Philadelphia PA 19147 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Lawyer/ Broker Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code A. Charles Peruto 2101 Pine Street Philadelphia PA 19103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer A. Charles Peruto Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dario Petrongolo 635 Johnson Road Sicklerville NJ 08081 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Construction Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Dario Petrongolo 635 Johnson Road Sicklerville NJ 08081 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Employed Occupation Construction Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003373

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Dino F. Petrongolo PO Box 1483 Blackwood NJ 08012 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AP Construction Occupation Contractor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dino F. Petrongolo PO Box 1483 Blackwood NJ 08012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AP Construction Occupation Contractor Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ruth L. Sigal 32 Brearly Road Princeton NJ 08540 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer OFS Holdings Inc Occupation Real Estate Developer Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code William T. Steerman, Esq. 615 Chestnut Street Philadelphia PA 19106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code The Casey for Auditor General Committee 434 Lackawanna Ave. Scranton PA 18503 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00 Permissible Funds
Full Name, Mailing Address, and ZIP Code Joseph Nicholas Tropea 310 Catherine Street, Unit F Philadelphia PA 19147 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Thomas Jefferson University Hospital Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code James A. Ulrich, III 1 Eves Drive, Suite 111 Marlton NJ 08053 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

2002032374

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Louis Ventra PO Box 3236 Margate NJ 08402	Name of Employer Self	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Restaurant Owner	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Louis Ventra PO Box 3236 Margate NJ 08402	Name of Employer Self	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Restaurant Owner	Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Heidi G. Villari 2101 Pine Street Philadelphia PA 19103	Name of Employer Charles Peruto Jr Attorneys	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Edward R. Wiercinski, Esq. 10,000 Lincoln Drive West, Suite 1 Marlton NJ 08053	Name of Employer Law Office of Edward R. Wiercinski	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Gennie Trimiglozzi 21 Tamari Ct Randolph NJ 07869	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/15/1999	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code Karen A. Balla 45 Shawnee Drive Watchung NJ 07060	Name of Employer Self	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Housewife	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Keith S. Balla 45 Shawnee Drive Watchung NJ 07060	Name of Employer Rosenfarb	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Accountant	Aggregate Year-to-Date > \$ 250.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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200032376

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	73 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Dr. David B. Basch 15 Apple Tree Lane Landing NJ 07850		Name of Employer Self, Family Practice Occupation Doctor		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Gino Capalbo 4 Tamari Court Randolph NJ 07869		Name of Employer Self- Deli Occupation Deli Owner		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Margarita Cart 65 Branchville-Lawson Road Newton NJ 07860		Name of Employer Self Occupation Homemaker		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Stephen F. Ficchi 281 North Winding Way Merion Station PA 19066		Name of Employer Bensalem Practice Occupation Doctor		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Howard Goldberg 117 Cheltenham Ave Linwood NJ 08821		Name of Employer Self Occupation Attorney		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Cheri Kessler 47 Smithfield Drive Springfield NJ 07081		Name of Employer Self Occupation Housewife		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Arthur F. Kobin 16 Crest Terr Montville NJ 07045		Name of Employer Rose Farb Winiers & Co Occupation CPA		Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Brian J. McMonagle 136 Pheasant Fields Lane Moorestown NJ 08057 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer McMonagle, Perri, et al Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jimmy D. Morrison 4 Kite Court Lawrenceville NJ 08648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Consultant Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jimmy D. Morrison 4 Kite Court Lawrenceville NJ 08648 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Consultant Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Alan S. Reisfield 325 Columbia Turnpike PO Box 948 Florham Park NJ 07932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Salomon Smith Barney Occupation Financial Planner Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Morton H. Reisfield PO Box 948 325 Columbia Tpk Florham Park NJ 07932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Salomon Smith Barney Occupation Financial Consultant Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code David C. Schwartz 3 Jaywood Manor Drive Brick NJ 08724 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Hankin Sandson Sandman Bradley & Palid Occupation Lawyer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/16/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Lionel M. Levey 140 Hardscrabble Road Bernardsville NJ 07924 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Levey Companies Occupation Executive Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/17/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	75 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Rita Levey 140 Hardscrabble Road Bernardsville NJ 07924		Name of Employer Levey. Corp.		Date (month, day, year) 12/17/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Real Estate		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Rita Levey 140 Hardscrabble Road Bernardsville NJ 07924		Name of Employer Levey. Corp.		Date (month, day, year) 12/17/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Real Estate		Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Katherine Del Tufo 13 Ober Road Princeton NJ 08540		Name of Employer Self		Date (month, day, year) 12/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Business Owner		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Katherine Del Tufo 13 Ober Road Princeton NJ 08540		Name of Employer Self		Date (month, day, year) 12/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Business Owner		Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code James C. Kellogg Box 317 Morristown NJ 07963		Name of Employer Community Foundation of New Jersey		Date (month, day, year) 12/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation President		Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code David A. McAlister 14705 Silverstone Drive Silver Spring MD 20905		Name of Employer Parsons Brinckerhoff Quade & Douglas,		Date (month, day, year) 12/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Senior Vice President		Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code William G. Mennen, IV PO Box 43 Oldwich NJ 08858		Name of Employer Power, Mennen, & Associates		Date (month, day, year) 12/18/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Attorney at Law		Aggregate Year-to-Date > \$ 1000.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Benefit Services LLC 486 Schooley's Mountain Road Hackettstown NJ 07840	Name of Employer (Partnership) Occupation	Date (month, day, year) 12/20/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Richard Ames 486 Schooley's Mountain Road [MEMO ITEM] Hackettstown NJ 07840	Name of Employer Benefit Services LLC Occupation Partner	Date (month, day, year) 12/20/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code William T. Deitz 6550 Sand Wedge Court Alexandria VA 22312	Name of Employer Palumbo & Cerrell, Inc. Occupation Consultant	Date (month, day, year) 12/20/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Benjamin L. Palumbo 1204 S. Oakcrest Road Arlington VA 22202	Name of Employer Palumbo & Cerrell, Inc. Occupation President	Date (month, day, year) 12/20/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Ram Caterers of Flatbush 2030 Ocean Parkway Brooklyn NY 11223	Name of Employer (Partnership) Occupation	Date (month, day, year) 12/20/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Simon Auerbacher 2030 Ocean Parkway [MEMO ITEM] Brooklyn NY 11223	Name of Employer Ram Caterers of Flatbush Occupation Owner	Date (month, day, year) 12/20/1999 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Ezio Rossi 1 Rossi Drive Clinton NJ 08809	Name of Employer Self Occupation Retired	Date (month, day, year) 12/20/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTALS of Receipts This Page (Optional)

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200203279

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Jaye Hewitt Semrod
926 Lawrenceville Road

Princeton NJ 08540

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
None

Occupation
Community Volunteer

Date (month,
day, year)
12/20/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Michael Bennett Solovay
40 East 88th Street, Apt 9C

New York NY 10128

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Treasurer's Best Efforts

Occupation

Date (month,
day, year)
12/20/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Lewis Topper
42-40 Bell Blvd
Suite 200
Bayside

NY 11361

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Fasn Food System

Occupation
Executive

Date (month,
day, year)
12/20/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

David G. Wolf
1200 Mill Road Suite B

Northfield NJ 08225

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Brandywine

Occupation
Executive Vice President

Date (month,
day, year)
12/20/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

Full Name, Mailing Address, and ZIP Code

Thomas A. Biga
29 Highland Ave

Fair Haven NJ 07704

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Clara Muass Medical Center

Occupation
Hospital Executive

Date (month,
day, year)
12/21/1999

Amount of Each
Receipt this Period
250.00

Aggregate Year-to-Date > \$ 250.00

Full Name, Mailing Address, and ZIP Code

Louis J. DiBella
27 Kaness Lane

Huntington Bay NY 11743

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Treasurer's Best Efforts

Occupation

Date (month,
day, year)
12/21/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Angelo Lefakis

Name of Employer
P&B Diner

Occupation
Owner

Date (month,
day, year)
12/21/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

SUBTOTALS of Receipts This Page (Optional)

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20003300

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Lisa McGovern 49 E Central Ave Moorestown NJ 08057 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Samuel N. Rabinowitz, Esq. One Logan Square 8th Floor Philadelphia PA 19103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Christopher A. Raphael 241 Riverdale Drive Fort Lee NJ 07024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Company Director Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert A. Roe PO Box 407 Wayne NJ 07470 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Robert A. Roe Assoc. Inc Occupation Executive Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code A. Fred Ruttenberg 51 Fries Lane Cherry Hill NJ 08003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Michael Veloric 3716 Church Road Mount Laurel NJ 08054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Tomahawk Asset Management Occupation Investment Management Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code John M. Blume 1 Main Street Chatham NJ 07928 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 1000.00

SUBTOTALS of Receipts This Page (Optional)

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20003381

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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Dr. John F. Bonamo 7 Jodi Lane Chatham NJ 07928 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Harold J. Bordwin 56 Westminster Rd Scarsdale NJ 10583 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Keen Realty Consultants, Inc. Occupation Real Estate Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Angelo DelRusso 2037 Morris Ave Union NJ 07083 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Del Sano Contracting Corp Occupation General Contractor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Dan DeTrollo 86 Netro Road West Orange NJ 07052 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Hartz Mountain Industries Occupation Assistant Vice President Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Bruce A. Eisenberg 1450 Starling Lane Cherry Hill NJ 08003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code John D. Fanburg One Cedar Ridge Dr. Chester NJ 07930 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brach Eichler Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Gary R. Goldenberg 404 Caranel Cir Penn Valley PA 19072 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
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2002032302

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ITEMIZED RECEIPTS

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Bruce I. Goldstein One Gateway Center Newark NJ 07102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Vincent D. Joseph 310 Woods End Road Westfield NJ 07090 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer St. Barnabas Medical Center Occupation Executive Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Julius A. Kaplan 131 Mendham Rd Mendham NJ 07945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Emergency Medical Assoc. Occupation Physician Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Kenneth Klass 337 S. 2nd Street Philadelphia PA 19106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Paul A. Mertz 4 Shadowbrook Lane Basking Ridge NJ 07920 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Newark Beth Israel Medical Center Occupation Health Care Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Amit K. Mody 1215 Echo Place Toms River NJ 08755 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Irvington General Hospital Occupation Executive Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Salvatore C. Natoli 1 Rosemont Hills Drive Florham Park NJ 07932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Wigder Leasing Corporation Occupation Manager, V.P. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
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20020333

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Richard P. Oths 26 Glen Gary Dr Mendham NJ 07945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Atlantic Health System Occupation President/ CEO Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Stephen B. Rockoff 314 Spyglass Way Jupiter FL 33477 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Stephen B. Rockoff 314 Spyglass Way Jupiter FL 33477 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Retired Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. James A. Rommer 349 E. Northfield Rd Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Seymour Traub 845 Benner Road Allentown PA 18104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 400.00
Full Name, Mailing Address, and ZIP Code Michael R. Valtin 2 Ellies Lane East Stroudsburg PA 18301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Midkra Microwave Occupation Operations Manager Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Donna M. Vible 76 Autumn Ridge Rd Bedminster NJ 07921 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Aon Risk Services Occupation Senior Vice President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Virginia A. Whelan 917 West Park Ave Ocean NJ 07712	Name of Employer Pro Auto Recyclers	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Director		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Joseph M. Wittenwiler 105 Hospitality Longport NJ 08403	Name of Employer Pro Auto Recyclers	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Director		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Dennis Culnan 183 Schoolhouse Lane Mt. Laurel NJ 08054	Name of Employer Self	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Consultant		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Joan M. Culnan 183 Schoolhouse Lane Mt. Laurel NJ 08054	Name of Employer Self	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Homemaker		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code James M. DiLorenzo PO Box 503 Watermill NY 11976	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Chara C. Haas 330 N. Spring Mill Road Villanova PA 19085	Name of Employer Self	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Homemaker		
Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code John C. Haas 330 N. Spring Mill Rd Villanova PA 19085	Name of Employer Self	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired		
Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)			
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ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Nicholas Harbist 422 Creek Road Moorestown NJ 08057 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Mark I. Rabinowitz 471 Ballyore Rd Wynnewood PA 19096 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Rome & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code George Siganos 1403 Atlantic Ave Longport NJ 08403 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Siganos Mgmt, Inc. Occupation Restaurateur Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jeffrey Blumenfeld 404C South Croskey Street Philadelphia PA 19146 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Blank Rome Comisky & McCauley Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Robert J. Del Tufo 13 Ober Road Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Skadden Arps Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jacqueline Klein 11 Brook Ridge Ct Cedar Grove NJ 07009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Accountant Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Cedric Kushner 191 Montauk Highway Water Mill NY 11976 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Cedric Kushner Promotions Occupation President & CEO Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020032386

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Charles J. Mannela 219 Mt. Vernon Ave Laurel Springs NJ 08021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer F.W.M.C.M. Occupation President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Victor Parsonnet 113 Sagamore Rd Millburn NJ 07041 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Doctor Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David M. Satz, Jr. One Gateway Center, 13 FI Newark NJ 07102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Joel H. Sterns 1262 River Drive Titusville NJ 08560 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sterns & Weinroth Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. Frank J. Vozos 26 Burnt mill Circle Oceanport NJ 07757 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Monmouth Medical Center Occupation Executive Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/27/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Peter J. Burke, Jr. 203 - 10th Street N. Brigantine NJ 08203 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brandywine Senior Care, Inc. Occupation CPA/Treasurer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Claire M. Codey 1000 1st Ave Spring Lake NJ 07762 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Claire M. Codey 1000 1st Ave Spring Lake NJ 07762 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Housewife Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Lawrence R. Codey 1000 1st Ave Spring Lake NJ 07762 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PSE&G Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Lawrence R. Codey 1000 1st Ave Spring Lake NJ 07762 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer PSE&G Occupation President Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code William H. Connolly, Jr. 274 Upper Mountain Ave Upper Montclair NJ 07043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer W.H. Connolly & Co. Occupation Insurance Broker Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Noreen C. Doyle 416 Center Street North Wales PA 19454 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation CPA Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Mary Argiris Efstratiades 405 Echo Place Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden County Occupation Admin. Tec- 2000 Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ira H. Jolles 610 West End Ave New York NY 10024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer GPU, Inc Occupation Lawyer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Peter La Zoropoulos 1620 Yorden Ave Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Notis Professional Occupation Engineer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Thomas D. Lewis 863 Scholl Rd. Pottstown Road PA 19465 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lewis Environmental Group Occupation President Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code William McElroy 2 Hawk Dr. Princeton Jct. NJ 08550 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Zurich-American Ins. Co. Occupation Insurance Underwriter Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Carole Salkind 801 Harmon Cove Towers Secaucus NJ 07094 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Legal Secretary Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Carole Salkind 801 Harmon Cove Towers Secaucus NJ 07094 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Legal Secretary Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Morton Salkind 801 Harmon Cove Terr Secaucus NJ 07094 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Morton Salkind 801 Harmon Cove Terr Secaucus NJ 07094 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Kathleen F. Tsatsaronis 44 Bruce Drive Deptford NJ 08096	Name of Employer Self	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Housewife	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Steven D. Weinstein 247 West Kings Highway Haddonfield NJ 08033	Name of Employer Blank Rome Comisky & McCauley	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Windels, Marx, Davies & Ives 120 Albany Street Plaza New Brunswick NJ 08901	Name of Employer (Partnership)	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Anthony R. Coscia, Esq. 120 Albany Street Plaza New Brunswick NJ 08901 [MEMO ITEM]	Name of Employer Windels, Marx, Davies & Ives	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Windels, Marx, Davies & Ives 120 Albany Street Plaza New Brunswick NJ 08901	Name of Employer (Partnership)	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Howard P. Lakind 120 Albany Street New Brunswick NJ 08901 [MEMO ITEM]	Name of Employer Windels, Marx, Davies & Ives	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Windels, Marx, Davies & Ives 120 Albany Street Plaza New Brunswick NJ 08901	Name of Employer (Partnership)	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 500.00 SEE ATTRIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 1500.00	
SUBTOTALS of Receipts This Page (Optional)			
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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Anthony R. Coscia, Esq. 120 Albany Street Plaza New Brunswick NJ 08901 [MEMO ITEM]	Name of Employer Windels, Marx, Davies & Ives Occupation Attorney	Date (month, day, year) 12/28/1999 SEE ATT	Amount of Each Receipt this Period 500.00 RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Windels, Marx, Davies & Ives 120 Albany Street Plaza New Brunswick NJ 08901	Name of Employer (Partnership) Occupation	Date (month, day, year) 12/28/1999 SEE ATT	Amount of Each Receipt this Period 500.00 RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Howard P. Lakind 120 Albany Street New Brunswick NJ 08901 [MEMO ITEM]	Name of Employer Windels, Marx, Davies & Ives Occupation Attorney	Date (month, day, year) 12/28/1999 SEE ATT	Amount of Each Receipt this Period 500.00 RIBUTION BELOW
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code James R. Zazzali 13 Hance Rd Rumson NJ 07760	Name of Employer Zazzali, Zazzali, Eagella Occupation Attorney	Date (month, day, year) 12/28/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Bill Balis 1019 Edgemoor Rd Cherry Hill NJ 08034	Name of Employer Treasurer's Best Efforts Occupation	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code John Balis 107 Westwood Court West Deptford NJ 08096	Name of Employer Self Occupation Restaurant Owner	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Usman Bandukra 24 Margie Street Oceanside NJ 11572	Name of Employer S&S Newstand Occupation Businessman	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Krishna D. Chugh 207 2nd Ave Pelham NY 10803 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Alfred C. DeCotiis Anthony Wayne Road Morristown NJ 07960 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer DeCotiis, Fitzpatrick & Gluck Occupation Attorney Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ronald J. DelMauro 50 Sherwood Ave Watchung NJ 07060 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Saint Barnabas Health Care System Occupation Pres. & CEO Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Falgun R. Dharja 10 Viscaya Court Wayne NJ 07470 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Mantiff Management Inc Occupation Business Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Rajiv Dharja 2 Lagoon Way Ledgewood NJ 07852 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Dunkin Donuts Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Pradip R. Kothari 171 Borman Ave Avenel NJ 07001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Indo-American Cultural Society Occupation President Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Chandrakant T. Patel 32 Minebrook Rd, Apt 98 Edison NJ 08820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Treasurer's Best Efforts Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 400.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Jagdish Patel 571 Newark Ave, H4 Elizabeth NJ 07208 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Business Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Jagdish Patel 571 Newark Ave, H4 Elizabeth NJ 07208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Business Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Mark D. Pilla 1 Log Road Tabernacle NJ 08088 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Saint Barnabas Health Care System Occupation Executive Vice President Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Rep. Winston G. Robinson, Ph.D. 72 Major Drive Sayreville NJ 08872 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Faith Fellowship Ministries Occupation Minister Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Rajul Shah 124 Childs Road Basking Ridge NJ 07920 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Lucent Tech Occupation Analyst Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Kulwant R. Shahi 163 S. Princeton Arms Cranbury NJ 08512 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Rose Telecom Occupation Businessman Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code Mortimer Steinberg 1600 Parker Avenue Fort Lee NJ 07024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer CIBC Oppenheimer Occupation Financial Consultant Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

George Wasilyew
336 Hewitt Ave

Trenton NJ 08611

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
ABOD, Inc.

Occupation
Computer Consultant

Date (month,
day, year)
12/29/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Gary T. Wiesner
26 Saint Anthony Court

Cherry Hill NJ 08003

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Pro Auto Recyclers

Occupation
Director

Date (month,
day, year)
12/29/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Stephen Wiesner
5 Tudor Court

Medford NJ 08055

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Pro Auto Recyclers

Occupation
Director

Date (month,
day, year)
12/29/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Alan L. Aufzien
PO Box 2369

Secaucus NJ 07096

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Treasurer's Best Efforts

Occupation
Executive

Date (month,
day, year)
12/30/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Francis Dehel
1002 Morgan Ave

Cinnaminson NJ 08077

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Blank, Rome, Comiskey, & McCauley

Occupation
Attorney

Date (month,
day, year)
12/30/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Dennis A. Estis
PO Box 5600

Woodbridge NJ 07095

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Greenbaum Rowe Smith Ravin Davis

Occupation
Lawyer

Date (month,
day, year)
12/30/1999

Amount of Each
Receipt this Period
500.00

Aggregate Year-to-Date > \$ 500.00

Full Name, Mailing Address, and ZIP Code

Peter Frank
120 Lloyd Road

Montclair NJ 07042

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Ten Hoeve Brothers

Occupation
Businessman

Date (month,
day, year)
12/30/1999

Amount of Each
Receipt this Period
1000.00

Aggregate Year-to-Date > \$ 1000.00

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11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Peter Frank 120 Lloyd Road Montclair NJ 07042 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Ten Hoeve Brothers Occupation Businessman Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code David Kessler 4 Hearthstone Terr Livingston NJ 07039 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer David Kessler & Associates, LLC Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/30/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code H Philippou 700 Ron Ct Bridgewater NJ 08807 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Treasurer's Best Efforts Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/30/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Evan L. Steinberg 91 Avondale Road Ridgewood NJ 07450 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer CIBC Oppenheimer Occupation Financial Consultant Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/30/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Frank S. Angelini 401 Route 28, Suite B5 Moorestown NJ 08057 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Optometrist Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Markus I. Barth 2495 Route 1 Lawrenceville NJ 08648 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Allied Vision Services Occupation Physician Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Bradley Blubaugh 288 Tall Pines Drive Sewell NJ 08080 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Remington & Vernick Engineers Occupation Engineer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020032395

20003396

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	93 / 126
					FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Bradley Blubaugh 288 Tall Pines Drive Sewell NJ 08080		Name of Employer Remington & Vernick Engineers		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Engineer			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Dorothea Frank 120 Lyod Road Montclair NJ 07042		Name of Employer Self		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Philanthropist/ Homemaker			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Dorothea Frank 120 Lyod Road Montclair NJ 07042		Name of Employer Self		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Philanthropist/ Homemaker			
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Mark Juliano 36 Chews Landing Road Haddonfield NJ 08033		Name of Employer Self		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chiropractor			
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Anthony R. Malatesta 1 Central Ave Mount Laurel NJ 08054		Name of Employer Federal Wine & Liquor		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Salesman			
		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Manko, Gold & Katcher, LLP 535 Route 38, Suite 320 Cherry Hill NJ 08002		Name of Employer (Partnership)		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation		SEE ATTRIBUTION BELOW	
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Bruce S. Katcher 535 Route 38, Suite 320 Cherry Hill NJ 08002		Name of Employer Manko, Gold & Katcher, LLP		Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney		SEE ATTRIBUTION BELOW	
		Aggregate Year-to-Date > \$ 500.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Barry H. Ostrowsky 95 Old Short Hills Road West Orange NJ 07052 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer St. Barnabas Health Care Occupation Executive Vice President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Dr. Lawrence A. Ragone 411 Monmouth Drive Cherry Hill NJ 08002 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden Optometric Eye Center Occupation Optometrist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Craig F. Remington 1064 Chanticleer Cherry Hill NJ 08003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Remington & Vernick Engineers Occupation Engineer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Craig F. Remington 1064 Chanticleer Cherry Hill NJ 08003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Remington & Vernick Engineers Occupation Engineer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Christine M. Ruppert 330 West End Ave, 11A New York NY 10023 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer FSA Occupation Bond Analyst Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Steven L. Shapiro 900 Kings Highway N, Suite 100 Cherry Hill NJ 08034 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Alloy, Silverstein, Shapiro, Adams, Mu Occupation Accountant Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Barbara Vena 425 Continental Street Forked River NJ 08731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Forked River Presbyterian Church Occupation Choir Director Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

20003397

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11A1

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Barbara Vena 425 Continental Street Forked River NJ 08731 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Forked River Presbyterian Church Occupation Choir Director Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Michael Vena 425 Continental Street Forked River NJ 08731 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Remington & Vernick Engineers Occupation Engineer Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Michael Vena 425 Continental Street Forked River NJ 08731 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Remington & Vernick Engineers Occupation Engineer Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Larry Charles Wallis 511 Market Street Camden NJ 08102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Camden Optometric Eye Center Occupation Optometrist Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Nancy L. Wollen 1122 Aster Drive Toms River NJ 08753 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer St. Barnabas Health Care Occupation Executive Director Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

432650.00

20020032398

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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11B**

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.**Full Name, Mailing Address, and ZIP Code**Salem County Democratic Committee
15 S. Main Street

Woodstown NJ 08098

Name of EmployerDate (month,
day, year)
08/29/1999Amount of Each
Receipt this Period
500.00**Occupation**Receipt For: ☒ Primary ☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

SUBTOTALS of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)**500.00**

20020032399

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Sheet Metal Workers International Association PAC 1750 New York Avenue, N.W. Washington DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code Sheet Metal Workers International Association PAC 1750 New York Avenue, N.W. Washington DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 10000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code SUMMIT FEDPAC 150 West State Street Trenton NJ 08608 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code UFCW International Union, AFL-CIO/CLC 1775 K Street, NW Washington DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 2000.00
Full Name, Mailing Address, and ZIP Code HUGHES FOR CONGRESS COMMITTEE 926 PALEN AVENUE OCEAN CITY NJ 08226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 08/29/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code HARRAH'S ENTERTAINMENT INC EMPLOYEES' POLITICAL ACTION COMMITTEE 1023 CHERRY ROAD MEMPHIS TN 38117 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/07/1999	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code SUN BANCORP INC PAC 226 LANDIS AVENUE VINELAND NJ 08360 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 09/21/1999	Amount of Each Receipt this Period 200.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200032400

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code IRONWORKERS POLITICAL ACTION LEAGUE 1750 NY AVE, NW SUITE 400 WASHINGTON DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 09/27/1999	Amount of Each Receipt this Period 2500.00
Full Name, Mailing Address, and ZIP Code Boilermakers-Blacksmiths Legislative Education Action Program 2722 Merilee Drive #360 Fairfax VA 22031 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 2000.00
Full Name, Mailing Address, and ZIP Code Brotherhood of Locomotive Engineers 1370 Ontario Street Cleveland OH 44113 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code UNITED ASSN JOURNEYMEN & APPRENT OF PLUMB & PIPEFITTING IND LOCAL 322 COMM FOR POL ED 534 SOUTH ROUTE 73 PO BOX 73 WINSLOW NJ 08095 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 7000.00	Date (month, day, year) 11/09/1999	Amount of Each Receipt this Period 2000.00
Full Name, Mailing Address, and ZIP Code Responsible Citizens Political League -A Project of the Transportation Communications in 3 Research Place Rockville MD 20850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3000.00	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period 3000.00
Full Name, Mailing Address, and ZIP Code AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE 1505 PRINCE STREET SUITE 300 ALEXANDRIA VA 22314 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 2000.00
Full Name, Mailing Address, and ZIP Code MAINTENANCE OF WAY POLITICAL LEAGUE 26555 EVERGREEN RD STE 200 SOUTHFIELD MI 48076 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 11/30/1999	Amount of Each Receipt this Period 5000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

200032401

20020032402

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code SILLS FEDERAL PAC, INC. ONE RIVERFRONT PLAZA NEWARK NJ 07102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 3000.00
Full Name, Mailing Address, and ZIP Code SILLS FEDERAL PAC, INC. ONE RIVERFRONT PLAZA NEWARK NJ 07102 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 10000.00	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code CONSECO INC CONCERNED CITIZENS POLITICAL ACTION 11825 NORTH PENNSYLVANIA CARMEL IN 46032 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer COMMITTEE (PAC) Occupation Aggregate Year-to-Date > \$ 5000.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code CONSECO INC CONCERNED CITIZENS POLITICAL ACTION 11825 NORTH PENNSYLVANIA CARMEL IN 46032 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer COMMITTEE (PAC) Occupation Aggregate Year-to-Date > \$ 10000.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 5000.00
Full Name, Mailing Address, and ZIP Code ITALIAN AMERICAN DEMOCRATIC LEADERSHIP COUNCIL 1275 K STREET NW STE 602 WASHINGTON DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 2500.00	Date (month, day, year) 12/21/1999	Amount of Each Receipt this Period 2500.00
Full Name, Mailing Address, and ZIP Code PARSONS CORPORATION POLITICAL ACTION COMMITTEE 100 WEST WALNUT STREET PASADENA CA 91124 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code STERNS & WEINROTH A PROFESSIONAL CORPORATION FEDERAL PAC 50 WEST STATE STREET PO BOX 1298 TRENTON NJ 08607 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer FEDERAL PAC Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12/23/1999	Amount of Each Receipt this Period 1000.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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11C

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code HS POLITICAL FUND THREE 1ST NATL PLAZA #4300 CHICAGO IL 60602	Name of Employer	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO ILA-COPE 17 BATTERY PLACE NEW YORK NY 10004	Name of Employer	Date (month, day, year) 12/31/1999	Amount of Each Receipt this Period 5000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 10000.00		

SUBTOTALS of Receipts This Page (Optional)

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63450.00

200032403

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER
13A

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Name of Employer Fischbein Badillo Wagner & Harding	Date (month, day, year) 12/22/1999	Amount of Each Receipt this Period 100000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 200000.00	
Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Name of Employer Fischbein Badillo Wagner & Harding	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 100000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 300000.00	

SUBTOTALS of Receipts This Page (Optional)

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200000.00

200020032404

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Sheehan Associates, Inc. 1901 L Street, NW, Fourth Floor Washington DC 20036	Name of Employer Occupation	Date (month, day, year) 09/24/1999	Amount of Each Receipt this Period 2500.00 Refund
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2500.00		
Full Name, Mailing Address, and ZIP Code Borale Realty 257 Livingston Avenue New Brunswick NJ 08901	Name of Employer Occupation	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period 1225.00 Return Deposit
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1225.00		

SUBTOTALS of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)**3725.00**

20020032405

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.**Full Name, Mailing Address, and ZIP Code**PNC Bank
1900 Greentree Road

Cherry Hill NJ 08003

Name of Employer**Date (month,
day, year)**
12/31/1999**Amount of Each
Receipt this Period**
2359.02
Interest**Occupation****Receipt For:** ☒ Primary ☐ General☐ Other (specify) :**Aggregate Year-to-Date** > \$ 2359.02**SUBTOTALS** of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)**2359.02**

20020032406

SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/02/1999	Amount of Each Disbursement This Period 5588.83
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/02/1999	Amount of Each Disbursement This Period 10986.13
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/02/1999	Amount of Each Disbursement This Period 29.45
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/02/1999	Amount of Each Disbursement This Period 14593.81
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/09/1999	Amount of Each Disbursement This Period 740.80
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/09/1999	Amount of Each Disbursement This Period 885.33
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/09/1999	Amount of Each Disbursement This Period 1136.98
Full Name, Mailing Address, and ZIP Code Varoga & Rice 5311 Kirby Drive, Suite 219 Houston TX 77005	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/14/1999	Amount of Each Disbursement This Period 10000.00
Full Name, Mailing Address, and ZIP Code Greenberg Quinlan Research, Inc. 515 Second Street, NE Washington DC 20002	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/21/1999	Amount of Each Disbursement This Period 32568.01
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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**NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.**

Full Name, Mailing Address, and ZIP Code The Campaign Group, Inc. 1600 Locust Street Philadelphia PA 19103	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/22/1999	Amount of Each Disbursement This Period 4500.00
Full Name, Mailing Address, and ZIP Code The Campaign Group, Inc. 1600 Locust Street Philadelphia PA 19103	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/22/1999	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code Alesi Graphics 7801 Airport Highway Pennsauken NJ 08109	Purpose of Disbursement Printing Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 3603.28
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Commerce Bank 1701 Route 70 East Cherry Hill NJ 08003	Purpose of Disbursement Travel & Meal Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 298.75
Full Name, Mailing Address, and ZIP Code Commerce National Insurance 1701 Route 70 East Cherry Hill NJ 08034	Purpose of Disbursement Insurance Premium Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 2257.00
Full Name, Mailing Address, and ZIP Code Curt Hudson Photography 6 East Haddon Avenue Oaklyn NJ 08107	Purpose of Disbursement Photography Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 563.30
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 1481.60
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/23/1999	Amount of Each Disbursement This Period 2022.23
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sheehan Associates, Inc. 1901 L Street, NW, Fourth Floor Washington DC 20036	Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	07/23/1999	7500.00
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	07/23/1999	2273.94
Travelers Bank USA Post Office Box 6214 Carol Stream IL 60197	Travel & Meal Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	07/23/1999	344.65
Tulipano Nero Ristorante 3747 Church Road Mount Laurel NJ 08054	Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	07/23/1999	6500.00
Camden County Democrat Committee, Inc. 26 Springdale Road - Building 27 Cherry Hill NJ 08003	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	07/29/1999	28513.58
Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	608.09
Camden County Democrat Committee, Inc. 26 Springdale Road - Building 27 Cherry Hill NJ 08003	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	7687.48
James Carville 424 South Washington Street Alexandria VA 22314	Reimburse for Travel Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	622.00
Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	1481.60

SUBTOTALS of Disbursements This Page (Optional)**TOTALS** This Period (last page this line number only)

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SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Christopher T. Morris 217 McClellan Avenue West Berlin NJ 08091	Compliance & Reporting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	4000.00
Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	2022.23
Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	69.10
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	2273.94
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	1706.08
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/06/1999	418.21
David Eichenbaum C/O Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/18/1999	106.38
Evergreen Partners, Inc. 2014 Rte 22 East Scotch Plains NJ 07076	Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/18/1999	12000.00
Christopher T. Morris 217 McClellan Avenue West Berlin NJ 08091	Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	08/18/1999	52.20
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/18/1999	Amount of Each Disbursement This Period 72.75
Full Name, Mailing Address, and ZIP Code Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/18/1999	Amount of Each Disbursement This Period 4000.00
Full Name, Mailing Address, and ZIP Code Varoga & Rice 5311 Kirby Drive, Suite 219 Houston TX 77005	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/18/1999	Amount of Each Disbursement This Period 4000.00
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/20/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/20/1999	Amount of Each Disbursement This Period 1481.60
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/20/1999	Amount of Each Disbursement This Period 2022.23
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/20/1999	Amount of Each Disbursement This Period 2273.94
Full Name, Mailing Address, and ZIP Code Century 21 309 Raritan Avenue Highland Park NJ 08904	Purpose of Disbursement Housing Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/24/1999	Amount of Each Disbursement This Period 600.00
Full Name, Mailing Address, and ZIP Code Denville Nissan	Purpose of Disbursement Automobile Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/24/1999	Amount of Each Disbursement This Period 1500.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	109 / 126
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NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
David Eichenbaum C/O Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003		Automobile Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		08/24/1999	3500.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Henry Schanzer 29 Brookfall Road Edison NJ 08817		Housing Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		08/24/1999	3375.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Doc's Place on the Bay 646 Bay Avenue Somers Point NJ 08244		Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		08/31/1999	2736.26
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
James J. Florio 76 Linden Avenue Metuchen NJ 08840		Loan Interest Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		08/31/1999	188.19
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
William J. Hughes 1019 Wesley Road Ocean City NJ 08226		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		08/31/1999	537.89
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536		Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		09/03/1999	608.09
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Gary M. Karr 619 Thomas Avenue Riverton NJ 08077		Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		09/03/1999	1481.60
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054		Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		09/03/1999	2022.23
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071		Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		09/03/1999	2273.94
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Purpose of Disbursement Loan Interest Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/09/1999	Amount of Each Disbursement This Period 168.15
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/10/1999	Amount of Each Disbursement This Period 435.17
Full Name, Mailing Address, and ZIP Code Evergreen Partners, Inc. 2014 Rte 22 East Scotch Plains NJ 07076	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/10/1999	Amount of Each Disbursement This Period 12000.00
Full Name, Mailing Address, and ZIP Code Levine/McEvoy Fundraising Consultants 18 East 16th Street New York NY 10003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/10/1999	Amount of Each Disbursement This Period 6000.00
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/10/1999	Amount of Each Disbursement This Period 166.58
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/17/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/17/1999	Amount of Each Disbursement This Period 1481.60
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/17/1999	Amount of Each Disbursement This Period 2022.23
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/17/1999	Amount of Each Disbursement This Period 2273.94
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/1999	Amount of Each Disbursement This Period 68.30
Full Name, Mailing Address, and ZIP Code Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/1999	Amount of Each Disbursement This Period 4000.00
Full Name, Mailing Address, and ZIP Code The Campaign Group, Inc. 1600 Locust Street Philadelphia PA 19103	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/21/1999	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code Varoga & Rice 5311 Kirby Drive, Suite 219 Houston TX 77005	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/30/1999	Amount of Each Disbursement This Period 5000.00
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/01/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/01/1999	Amount of Each Disbursement This Period 1481.60
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Tax Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/01/1999	Amount of Each Disbursement This Period 2022.23
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/01/1999	Amount of Each Disbursement This Period 2273.94
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649	Purpose of Disbursement Telephone Deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/08/1999	Amount of Each Disbursement This Period 2800.00

SUBTOTALS of Disbursements This Page (Optional)

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Curt Hudson Photography 6 East Haddon Avenue Oaklyn NJ 08107		Photography Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	452.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
David Eichenbaum C/O Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	1282.96
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Evergreen Partners, Inc. 2014 Rte 22 East Scotch Plains NJ 07076		Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	12000.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
James J. Florio 76 Linden Avenue Metuchen NJ 08840		Loan Interest Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	1200.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Greenberg Quinlan Research, Inc. 515 Second Street, NE Washington DC 20002		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	298.37
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Levine/McEvoy Fundraising Consultants 18 East 16th Street New York NY 10003		Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	6000.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	592.58
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003		Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	4000.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
The Campaign Group, Inc. 1600 Locust Street Philadelphia PA 19103		Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		10/12/1999	2000.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Florio Group One Penn Center 1617 JFK Blvd. Philadelphia PA 19103	Fundraising Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/12/1999	3111.65
Full Name, Mailing Address, and ZIP Code Varoga & Rice 5311 Kirby Drive, Suite 219 Houston TX 77005	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/12/1999	Amount of Each Disbursement This Period 9066.28
Full Name, Mailing Address, and ZIP Code American Express Suite 0001 Chicago IL 60679-0001	Purpose of Disbursement Office Equipment- Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/14/1999	Amount of Each Disbursement This Period 2431.42
Full Name, Mailing Address, and ZIP Code Exchange Holding 2014 Route 22 East Scotch Plains NJ 07076	Purpose of Disbursement Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/14/1999	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/15/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/15/1999	Amount of Each Disbursement This Period 1487.75
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/15/1999	Amount of Each Disbursement This Period 1994.24
Full Name, Mailing Address, and ZIP Code Jeffrey M. Stein 709 4th Street #2 Lyndhurst NJ 07071	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/15/1999	Amount of Each Disbursement This Period 2273.94
Full Name, Mailing Address, and ZIP Code U.S. Postmaster Markkress Road Cherry Hill NJ 08003	Purpose of Disbursement Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	10/20/1999	Amount of Each Disbursement This Period 163.20
SUBTOTALS of Disbursements This Page (Optional)			
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SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	114 / 126
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649		Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/21/1999	Amount of Each Disbursement This Period 235.00
Full Name, Mailing Address, and ZIP Code Dawn Measel 330 High Street Elizabeth NJ 07202		Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/22/1999	Amount of Each Disbursement This Period 796.50
Full Name, Mailing Address, and ZIP Code New Jersey Jewish News 901 Route 10 Whippany NJ 07981		Purpose of Disbursement Advertising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/22/1999	Amount of Each Disbursement This Period 1330.00
Full Name, Mailing Address, and ZIP Code David Eichenbaum C/O Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003		Purpose of Disbursement Expense Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/1999	Amount of Each Disbursement This Period 2152.25
Full Name, Mailing Address, and ZIP Code Elizabeth J. Shipp 100 Hiram Square, #124 New Brunswick NJ 08901		Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/27/1999	Amount of Each Disbursement This Period 10000.00
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649		Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 204.23
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536		Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Boraie Realty 257 Livingston Avenue New Brunswick NJ 08901		Purpose of Disbursement Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Exchange Holding 2014 Route 22 East Scotch Plains NJ 07076		Purpose of Disbursement Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 2000.00
SUBTOTALS of Disbursements This Page (Optional)					
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SCHEDULE B

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

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 1498.68
Full Name, Mailing Address, and ZIP Code Dawn Measel 330 High Street Elizabeth NJ 07202	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 361.10
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 894.90
Full Name, Mailing Address, and ZIP Code Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 4000.00
Full Name, Mailing Address, and ZIP Code The Campaign Group, Inc. 1600 Locust Street Philadelphia PA 19103	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/29/1999	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code Boraie Realty 257 Livingston Avenue New Brunswick NJ 08901	Purpose of Disbursement Housing Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1999	Amount of Each Disbursement This Period 1225.00
Full Name, Mailing Address, and ZIP Code Evergreen Partners, Inc. 2014 Rte 22 East Scotch Plains NJ 07076	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1999	Amount of Each Disbursement This Period 12000.00
Full Name, Mailing Address, and ZIP Code Levine/McEvoy Fundraising Consultants 18 East 16th Street New York NY 10003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1999	Amount of Each Disbursement This Period 6000.00
Full Name, Mailing Address, and ZIP Code Elizabeth J. Shipp 100 Hiram Square, #124 New Brunswick NJ 08901	Purpose of Disbursement Travel Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/01/1999	Amount of Each Disbursement This Period 458.91
SUBTOTALS of Disbursements This Page (Optional)			
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Atlantic Office Systems 158 First Avenue Atlantic Highlands NJ 07716	Purpose of Disbursement Office Supply Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/09/1999	Amount of Each Disbursement This Period 265.00
Full Name, Mailing Address, and ZIP Code Blackbird Restaurant 60 East 98th Street New York NY 10017	Purpose of Disbursement Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/09/1999	Amount of Each Disbursement This Period 1026.00
Full Name, Mailing Address, and ZIP Code American Express Suite 0001 Chicago IL 60679-0001	Purpose of Disbursement Reimbursement- Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 758.65
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 699.31
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 100.59
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Reimbursement- Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 21.70
Full Name, Mailing Address, and ZIP Code Cort Furniture 260 Schuyler Ave Kearney NJ 07032	Purpose of Disbursement Rental Equipment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 702.91
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 134.20
Full Name, Mailing Address, and ZIP Code Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/10/1999	Amount of Each Disbursement This Period 1251.00
SUBTOTALS of Disbursements This Page (Optional)			
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SCHEDULE B**ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/12/1999	608.09
Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/12/1999	1498.68
Dawn Measel 330 High Street Elizabeth NJ 07202	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/12/1999	706.14
Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/12/1999	1061.93
Knife & Fork Albany and Pacific Ave Atlantic City NJ 08401	Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/18/1999	1541.75
New Riverwatch Commons Assoc Riverwatch Commons New Brunswick NJ 08901	Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/22/1999	3000.00
Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/23/1999	86.05
Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/24/1999	608.09
Edward W. Bray 149 West Cuthbert Blvd. Oaklyn NJ 08107	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	11/24/1999	1553.23
SUBTOTALS of Disbursements This Page (Optional)			
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SCHEDULE B

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Robert S. Garrison 318 Ann Street, #6 Harrison NJ 07029	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/24/1999	Amount of Each Disbursement This Period 1207.21
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/24/1999	Amount of Each Disbursement This Period 1498.68
Full Name, Mailing Address, and ZIP Code Dawn Measel 330 High Street Elizabeth NJ 07202	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/24/1999	Amount of Each Disbursement This Period 706.14
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/24/1999	Amount of Each Disbursement This Period 2554.16
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 335.89
Full Name, Mailing Address, and ZIP Code Greenberg Quinlan Research, Inc. 515 Second Street, NE Washington DC 20002	Purpose of Disbursement Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 382.00
Full Name, Mailing Address, and ZIP Code Levine/McEvoy Fundraising Consultants 18 East 16th Street New York NY 10003	Purpose of Disbursement Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 537.24
Full Name, Mailing Address, and ZIP Code Henry Schanzer 29 Brookfall Road Edison NJ 08817	Purpose of Disbursement Housing Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 1350.00
Full Name, Mailing Address, and ZIP Code Elizabeth J. Shipp 100 Hiram Square, #124 New Brunswick NJ 08901	Purpose of Disbursement Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 763.87
SUBTOTALS of Disbursements This Page (Optional)			
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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Struble Oppel Communications 700 Seventh Street, SE Washington DC 20003	Purpose of Disbursement Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 11/30/1999	Amount of Each Disbursement This Period 4348.25
Full Name, Mailing Address, and ZIP Code TotalTel PO Box 23041 Newark NJ 07189	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/01/1999	Amount of Each Disbursement This Period 529.93
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/02/1999	Amount of Each Disbursement This Period 192.28
Full Name, Mailing Address, and ZIP Code East Brunswick Hilton 3 Tower Center Blvd East Brunswick NJ 08816	Purpose of Disbursement Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/02/1999	Amount of Each Disbursement This Period 17921.00
Full Name, Mailing Address, and ZIP Code Cort Furniture 260 Schuyler Ave Kearney NJ 07032	Purpose of Disbursement Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/06/1999	Amount of Each Disbursement This Period 181.44
Full Name, Mailing Address, and ZIP Code Cort Furniture 260 Schuyler Ave Kearney NJ 07032	Purpose of Disbursement Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/08/1999	Amount of Each Disbursement This Period 523.36
Full Name, Mailing Address, and ZIP Code Imaginations 2014 Route 22 East Scotch Plains NJ 07076	Purpose of Disbursement Reception Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/08/1999	Amount of Each Disbursement This Period 1029.79
Full Name, Mailing Address, and ZIP Code 390 George Street Associates 120 Albany Street New Brunswick NJ 08901	Purpose of Disbursement Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 608.09

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

20000032422

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Edward W. Bray 149 West Cuthbert Blvd. Oakdyn NJ 08107	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 1553.23
Full Name, Mailing Address, and ZIP Code Evergreen Partners, Inc. 2014 Rte 22 East Scotch Plains NJ 07076	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 12000.00
Full Name, Mailing Address, and ZIP Code Exchange Holding 2014 Route 22 East Scotch Plains NJ 07076	Purpose of Disbursement Office Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code Robert S. Garrison 318 Ann Street, #6 Harrison NJ 07029	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 1207.21
Full Name, Mailing Address, and ZIP Code Gary M. Karr 619 Thomas Avenue Riverton NJ 08077	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 481.53
Full Name, Mailing Address, and ZIP Code Dawn Measel 330 High Street Elizabeth NJ 07202	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 706.14
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 5431.18
Full Name, Mailing Address, and ZIP Code Henry Schanzer 29 Brookfall Road Edison NJ 08817	Purpose of Disbursement Housing Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 1350.00
Full Name, Mailing Address, and ZIP Code Susan Scheuerer 225 North 19th Street Kenilworth NJ 07033	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 763.39

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

20020033423

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Trina Scordo 19 Orchard Street, #3 Jersey City NJ 07306	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 1005.40
Full Name, Mailing Address, and ZIP Code Elizabeth J. Shipp 100 Hiram Square, #124 New Brunswick NJ 08901	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/09/1999	Amount of Each Disbursement This Period 2774.29
Full Name, Mailing Address, and ZIP Code 390 George Street Associates 120 Albany Street New Brunswick NJ 08901	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 20.00
Full Name, Mailing Address, and ZIP Code Atlantic Office Systems 158 First Avenue Atlantic Highlands NJ 07716	Purpose of Disbursement Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 40.88
Full Name, Mailing Address, and ZIP Code Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 46.33
Full Name, Mailing Address, and ZIP Code Curt Hudson Photography 6 East Haddon Avenue Oaklyn NJ 08107	Purpose of Disbursement Photographs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 149.12
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 91.95
Full Name, Mailing Address, and ZIP Code UNISTAR 5710 Commons Park Syracuse NY 13214	Purpose of Disbursement Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/14/1999	Amount of Each Disbursement This Period 321.06
Full Name, Mailing Address, and ZIP Code James A. Wallace 25 Newman Street Metuchen NJ 08840	Purpose of Disbursement Consulting Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/15/1999	Amount of Each Disbursement This Period 646.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

20020032424

20020032425

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	122 / 126
					FOR LINE NUMBER 17
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NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
James A. Wallace 25 Newman Street Metuchen NJ 08840		Reimbursement for Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/15/1999	75.00
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic Mobile Brunswick Square Mall East Brunswick NJ 08816		Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/16/1999	204.99
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic-NJ 514 Kindermack Road Oradell NJ 07649		Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/16/1999	230.26
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Robert S. Garrison 318 Ann Street, #6 Harrison NJ 07029		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/16/1999	136.95
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
AT&T		Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/20/1999	849.08
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
TotalTel PO Box 23041 Newark NJ 07189		Telephone Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/20/1999	366.68
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Atlantic Office Systems 158 First Avenue Atlantic Highlands NJ 07716		Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/21/1999	62.08
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536		Reimbursement for Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/21/1999	24.55
Full Name, Mailing Address, and ZIP Code		Purpose of Disbursement		Date (month, day, year)	Amount of Each Disbursement This Period
MindSpring Enterprises, Inc. PO Box 7695 Atlanta GA 30357		Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		12/21/1999	219.95
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code Stacey A. Bhaerman 5404 Fox Run Drive Plainsboro NJ 08536	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 608.09
Full Name, Mailing Address, and ZIP Code Edward W. Bray 149 West Cuthbert Blvd. Oaklyn NJ 08107	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 1553.23
Full Name, Mailing Address, and ZIP Code Robert S. Garrison 318 Ann Street, #6 Harrison NJ 07029	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 1207.21
Full Name, Mailing Address, and ZIP Code Dawn Measel 330 High Street Elizabeth NJ 07202	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 706.14
Full Name, Mailing Address, and ZIP Code Paychex, Inc. 305 Fellowship Road Mount Laurel NJ 08054	Purpose of Disbursement Payroll Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 5327.04
Full Name, Mailing Address, and ZIP Code Susan Scheuerer 225 North 19th Street Kenilworth NJ 07033	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 763.39
Full Name, Mailing Address, and ZIP Code Trina Scordo 19 Orchard Street, #3 Jersey City NJ 07306	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 1005.40
Full Name, Mailing Address, and ZIP Code Elizabeth J. Shipp 100 Hiram Square, #124 New Brunswick NJ 08901	Purpose of Disbursement Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 12/23/1999	Amount of Each Disbursement This Period 2774.29

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

445956.63

20020032426

ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER
19A

NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Purpose of Disbursement Loan Payment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/31/1999	Amount of Each Disbursement This Period 3300.00
Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Purpose of Disbursement Loan Payment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/09/1999	Amount of Each Disbursement This Period 3500.00
Full Name, Mailing Address, and ZIP Code James J. Florio 76 Linden Avenue Metuchen NJ 08840	Purpose of Disbursement Reimbursement for Loan Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/12/1999	Amount of Each Disbursement This Period 93200.00

TOTALS This Period (last page this line number only)

100000.00

220020032427

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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**FOR LINE NUMBER
20A**

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NAME OF COMMITTEE (In Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code

Nicholas M. Sands
5540 Scarington Court

Orlando FL 32821

Purpose of Disbursement

Returned Contribution

Disbursement for: ☒ Primary ☐ General

☐ Other (specify):

Date (month,
day, year)

11/23/1999

**Amount of Each
Disbursement This
Period**
1000.00

Full Name, Mailing Address, and ZIP Code

Nicholas M. Sands
5540 Scarington Court

Orlando FL 32821

Purpose of Disbursement

Returned Contribution

Disbursement for: ☐ Primary ☒ General

☐ Other (specify):

Date (month,
day, year)

11/23/1999

**Amount of Each
Disbursement This
Period**
1000.00

Full Name, Mailing Address, and ZIP Code

Chelsfield Westbury, LLC
400 Park Avenue

New York NY 10003

Purpose of Disbursement

Returned Contribution

Disbursement for: ☒ Primary ☐ General

☐ Other (specify):

Date (month,
day, year)

12/23/1999

**Amount of Each
Disbursement This
Period**
1000.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

3000.00

20020032428

20020032429

SCHEDULE C (Revised 3/80)		LOANS		Use separate schedule(s) for each numbered line	126 / 126 FOR LINE NUMBER 18
NAME OF COMMITTEE (in Full) Florio for Senate Committee, Inc.					
Full Name, Mailing Address, and ZIP Code of Loan Source James J. Florio 76 Linden Avenue Metuchen NJ 08840		Original Amount of Loan 100000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 100000.00	
Election : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.3213			
TERMS : Date incurred: 12/22/1999		Date Due:		Interest Rate(%) = <input type="checkbox"/> Secured	
Full Name, Mailing Address, and ZIP Code of Loan Source James J. Florio 76 Linden Avenue Metuchen NJ 08840		Original Amount of Loan 100000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 100000.00	
Election : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.3218			
TERMS : Date incurred: 12/29/1999		Date Due:		Interest Rate(%) = <input type="checkbox"/> Secured	
Full Name, Mailing Address, and ZIP Code of Loan Source James J. Florio 76 Linden Avenue Metuchen NJ 08840		Original Amount of Loan 100000.00	Cumulative Payment to Date 100000.00	Balance Outstanding at Close of This Period 0.00	
Election : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		REF-ID : SC/10.1196			
TERMS : Date incurred: 06/30/1999		Date Due:		Interest Rate(%) = <input type="checkbox"/> Secured	
SUBTOTALS This Period This Page (Optional)					
TOTALS This Period (last page this line number only)					200000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary					

GARY L. SISCO
SECRETARY

PAMELA R. GAVIN
SUPERINTENDENT
MARY BUILDING
SUITE 202
WASHINGTON, DC 20510-7115
PHONE: 202-224-5332

United States Senate

OFFICE OF PUBLIC RECORDS

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HAND DELIVERED

Date of Receipt

INSIDE MAIL

Date of Receipt

**RECEIVED FROM THE HOUSE OFFICE OF RECORDS
& REGISTRATIONS.**

Date of Receipt

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Date of Receipt

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Postmarked

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Postmarked

NO POSTMARK

POSTMARK ILLEGIBLE

OTHER (Specify):

Postmark and/or Date of Receipt

R.D.
Preparer

2/2/00
Date Prepared