

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Mike Halfacre For Congress Inc

ADDRESS (number and street) PO Box 225

Check if different than previously reported. (ACC)

Colonia NJ 07067

2. **FEC IDENTIFICATION NUMBER** C00460394

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

NJ 12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on [] [] [] in the State of []

(c) 30-Day **POST**-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 07 01 2010 through 09 30 2010

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 Ronald Gravino

Signature of Treasurer Electronically Filed by Ronald Gravino Date 10 10 2010

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

Office Use Only							
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Mike Halfacre For Congress Inc

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	0.00	110003.81
(b) Total Contribution Refunds (from Line 20(d)).....	200.00	650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-200.00	109353.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	8160.00	90820.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8160.00	90820.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10148.43	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Mike Halfacre For Congress Inc

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	0.00	87190.00
(i) Itemized (use Schedule A).....	0.00	22813.81
(ii) Unitemized.....	0.00	110003.81
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	110003.81
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	110003.81

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	8160.00	90820.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	200.00	650.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	650.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	8360.00	91470.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	18508.43
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	18508.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	8360.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10148.43

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
Mike Halfacre For Congress Inc

A.

Full Name (Last, First, Middle Initial)
Anna Little For Congress

Transaction ID: SB17.5687
Date of Disbursement

Mailing Address PO Box 382

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

City Highlands State NJ Zip Code 07732

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Annette Corcoran

Transaction ID: SB17.5709
Date of Disbursement

Mailing Address 30 Hillside Ave.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

City Sayreville State NJ Zip Code 08872

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
Compliance

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Election Fund Of Mary Pat Angelini

Transaction ID: SB17.5697
Date of Disbursement

Mailing Address 100 Begonia Court

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

City Jackson State NJ Zip Code 08527

Amount of Each Disbursement this Period

550.00

Purpose of Disbursement
Contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mike Halfacre For Congress Inc

A. Full Name (Last, First, Middle Initial)
Fair Haven Republican Committee

Mailing Address 43 Lewis Point

City State Zip Code
Fair Haven NJ 07704

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5711

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Friends Of Golden For Sheriff

Mailing Address PO Box 225

City State Zip Code
Colonia NJ 07067

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5689

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Friends Of Golden For Sheriff

Mailing Address PO Box 225

City State Zip Code
Colonia NJ 07067

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5701

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Mike Halfacre For Congress Inc

A.

Full Name (Last, First, Middle Initial)
Friends of Jennifer Beck

Mailing Address 100 Begonia Court

City Jackson State NJ Zip Code 08572

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5699
Date of Disbursement

08 / 13 / 2010

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Ronald Gravino Consulting

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement
Compliance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5672
Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Ronald Gravino Consulting

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement
Compliance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5710
Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

7750.00