

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

DONALD NORCROSS FOR CONGRESS

ADDRESS (number and street)

PO BOX 160

Check if different  
than previously  
reported. (ACC)

COLLINGSWOOD

NJ

08108

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00558320

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

NJ

01

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

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2025

through

M M / D D / Y Y Y Y  
03 / 31 / 2025*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

Pollitt, Melissa, D, ,

Signature of Treasurer

Pollitt, Melissa, D, ,

Date

M M / D D / Y Y Y Y  
07 / 11 / 2025

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025

	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)) ....	110815.44	115537.44
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	110815.44	115537.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	53890.41	163693.00
(b) Total Offsets to Operating Expenditures (from Line 14) .....	25.00	25.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	53865.41	163668.00
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1733797.01	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**DONALD NORCROSS FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025**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****(i) Itemized (use Schedule A).....**

35600.00

37600.00

**(ii) Unitemized .....**

1215.44

1437.44

**(iii) TOTAL of contributions  
from individuals .....**

36815.44

39037.44

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees  
(such as PACs) .....**

74000.00

76500.00

**(d) The Candidate .....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..**

110815.44

115537.44

**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.) .....**

25.00

25.00

**15. OTHER RECEIPTS  
(Dividends, Interest, etc.) .....**

12408.65

21044.24

**16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4).....**

123249.09

136606.68

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

**II. DISBURSEMENTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

53890.41

163693.00

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate.....

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS .....

43050.00

44050.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

96940.41

207743.00

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

1707488.33

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

123249.09

25. SUBTOTAL (add Line 23 and Line 24).....

1830737.42

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

96940.41

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

1733797.01

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 82

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Appel, Nina, , ,

**A.**

Mailing Address 1100 Lovering Ave

City

Wilmington

State

DE

Zip Code

19806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2025

Transaction ID : SA11AI.40724

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

14509.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2025

Transaction ID : SA11AI.40724.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Barker, Michael, , ,

**C.**

Mailing Address 210 New Rd  
#12

City

Linwood

State

NJ

Zip Code

08221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Barker Law Firm

Occupation

Attorney

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 15 / 2025

Transaction ID : SA11AI.40735

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

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

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

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19689.44

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		15		2025

Transaction ID : SA11AI.40735.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution**B.**

Full Name (Last, First, Middle Initial)

Benedon, Robert, M, ,

Mailing Address 24 Liberty Ln

City

Cherry Hill

State

NJ

Zip Code

08002

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

Name of Employer

Occupation

Self-Employed

Dentist

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		15		2025

Transaction ID : SA11AI.40654

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		15		2025

Transaction ID : SA11AI.40654.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Boden, Sarah, , ,

**A.**

Mailing Address 2108 East Arizona St

City

Philadelphia

State

PA

Zip Code

19125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Uber Technologies

Occupation

Executive

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	5	

Transaction ID : SA11AI.40696

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

22189.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	5	

Transaction ID : SA11AI.40696.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Buss, Joseph, , ,

**C.**

Mailing Address 708 Covington Terrace

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thunderbolt Solutions

Occupation

Engineer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.40543

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ACTBLUE

**A.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 27 2025

Transaction ID : SA11AI.40543.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Buss, Joseph, , ,

**B.**

Mailing Address 708 Covington Terrace

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Thunderbolt Solutions

Engineer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 27 2025

Transaction ID : SA11AI.40601

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

ACTBLUE

**C.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1398.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 27 2025

Transaction ID : SA11AI.40601.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Conduit Contribution

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

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

250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Buss, Joseph, , ,

**A.**

Mailing Address 708 Covington Terrace

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thunderbolt SolutionsOccupation  
Engineer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	5	

Transaction ID : SA11AI.40639

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5978.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	5	

Transaction ID : SA11AI.40639.0

Amount of Each Receipt this Period

250.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Ceisler, Larry, , ,

**C.**

Mailing Address 130 N 18th St, # 1300

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
Consultant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	5	

Transaction ID : SA11AI.40688

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

22439.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11AI.40688.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Crane, Stephen, , ,

**B.**

Mailing Address 2132 Green St

City

Philadelphia

State

PA

Zip Code

19130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

N/A

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2025

Transaction ID : SA11AI.40716

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21189.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 18 2025

Transaction ID : SA11AI.40716.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 82

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Davidson, Robert, , ,

**A.**

Mailing Address 17 Pollock Ct

City

West Berlin

State

NJ

Zip Code

08091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 26 2025

Transaction ID : SA11AI.40698

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

26439.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 26 2025

Transaction ID : SA11AI.40698.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Devor, Harris, , ,

**C.**

Mailing Address 250 S 17th St  
#1000

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CBIZ

Occupation

Forensic Accountant

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : SA11AI.40714

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20689.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2025

Transaction ID : SA11AI.40714.0

Amount of Each Receipt this Period

500.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Durrer, Austin, , ,

Mailing Address 155 Kentucky Ave  
SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Moran Global Strategies

Government Relations

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2025

Transaction ID : SA11AI.40638

Amount of Each Receipt this Period

1500.00



Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

**C** C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7478.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2025

Transaction ID : SA11AI.40638.0

Amount of Each Receipt this Period

1500.00



Memo Item

Conduit Contribution

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

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Eisenberg, Stewart, J, ,

**A.**

Mailing Address 2416 Naudain St

City

Philadelphia

State

PA

Zip Code

19146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eisenberg Rothweiler et al

Occupation

Attorney

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : SA11AI.40713

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

20189.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : SA11AI.40713.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Erlbaum, Gary, E, ,

**C.**

Mailing Address 44 West Lancaster Ave  
Ste 110

City

Ardmore

State

PA

Zip Code

19003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Greentree Properties

Occupation

Real Estate

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 26 2025

Transaction ID : SA11AI.40678

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Earmarked Contribution

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

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

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

10500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	2	5

Transaction ID : SA11AI.40678.0

Amount of Each Receipt this Period

2000.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Felgoise, Marc, , ,

Mailing Address 7139 Sheaff Lane

City

Fort Washington

State

PA

Zip Code

19034

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

Name of Employer

Occupation

Intersect Advisers

Business Advisory

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

Transaction ID : SA11AI.40697

Amount of Each Receipt this Period

1000.00



Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

25939.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

Transaction ID : SA11AI.40697.0

Amount of Each Receipt this Period

1000.00



Memo Item

Conduit Contribution

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

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 82

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Fierman, Daniel, , ,

**A.**

Mailing Address PO Box 1414

City

Kingston

State

PA

Zip Code

18704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SRMOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

Transaction ID : SA11AI.40748

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

Transaction ID : SA11AI.40748.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Flager, Randall, , ,

**C.**Mailing Address 1210 Northbrook Dr  
Ste 280

City

Trevose

State

PA

Zip Code

19053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Flager & AssociatesOccupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	2	5

Transaction ID : SA11AI.40749

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 07 2025

Transaction ID : SA11AI.40749.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Friedman, Alan, , ,

**B.**

Mailing Address 1 Baycrest Ct

City

Margate

State

NJ

Zip Code

08402

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

N/A

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 12 2025

Transaction ID : SA11AI.40651

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 12 2025

Transaction ID : SA11AI.40651.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Conduit Contribution

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

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

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Galler, Judith, , ,

**A.**

Mailing Address 6101 Atlantic Ave

City

Ventnor

State

NJ

Zip Code

08406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 12 2025

Transaction ID : SA11AI.40650

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution**B.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 12 2025

Transaction ID : SA11AI.40650.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit Contribution**C.**

Full Name (Last, First, Middle Initial)

Garber, Lori, , ,

Mailing Address 102 S Lafayette Ave

City

Ventnor City

State

NJ

Zip Code

08406

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 27 2025

Transaction ID : SA11AI.40679

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

11000.00

Date of Receipt

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

Transaction ID : SA11AI.40679.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Greer, Brian, , ,

Mailing Address 670 9th St  
SW

City

Washington

State

DC

Zip Code

20024

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

Name of Employer

Occupation

Empire Consulting Group

Partner

Receipt For: 2026



Primary



General

☒ Other (specify) ▼

3/5

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.40615

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2083.00

Date of Receipt

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

Transaction ID : SA11AI.40615.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 82

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Grubb, David, N, ,

**A.**

Mailing Address 554 Taunton Rd

City

Wyckoff

State

NJ

Zip Code

07481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Perma IncOccupation  
Chairman

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.40762

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hammel, Vic, , ,

**B.**

Mailing Address 1312 Parkside Dr South

City

Wyomissing

State

PA

Zip Code

10610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Not Employed

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.40652

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11AI.40652.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

1500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Hockstein, Neil, , ,

**A.** Mailing Address 310 Centennial Circle

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENT & Allergy of DEOccupation  
Physician

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2025

Transaction ID : SA11AI.40733

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.** Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

19189.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2025

Transaction ID : SA11AI.40733.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Hubert, Randy, , ,

**C.** Mailing Address 56 Stone Cliff Rd

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025

Transaction ID : SA11AI.40676

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution

1500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40676.0

Amount of Each Receipt this Period

500.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Joffe, Paula, , ,

Mailing Address 17 Pollock Ct

City

West Berlin

State

NJ

Zip Code

08091

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

Name of Employer

Occupation

StandWithUs

Exec Director MidAtlantic

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40694

Amount of Each Receipt this Period

500.00



Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

23939.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40694.0

Amount of Each Receipt this Period

500.00



Memo Item

Conduit Contribution

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

500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Kayne, Barry, , ,

Mailing Address 1299 Barley Mill Rd

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Periodontist

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40695

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked Contribution

A.

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

24939.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40695.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Conduit Contribution

B.

Full Name (Last, First, Middle Initial)

Krakauer, Randall, , ,

Mailing Address 29 Lorie Ln

City

Princeton Junction

State

NJ

Zip Code

08550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2025D D / Y Y Y Y Y  
13 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40653

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

C.

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 13 2025

Transaction ID : SA11AI.40653.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Longwill, Michael, , ,

**B.**

Mailing Address 6 Pheasant Ln

City

Chaddsford

State

PA

Zip Code

19317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Lomax Carpet & Tile

Excutive

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11AI.40692

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

23439.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11AI.40692.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 82

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Maitland, Lorraine, , ,

**A.** Mailing Address 18 West Split Rock Dr

City  
Cherry Hill

State  
NJ

Zip Code  
08003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : SA11AI.40646

Amount of Each Receipt this Period

100.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.** Mailing Address P.O. BOX 441146

City  
SOMERVILLE

State  
MA

Zip Code  
02144

FEC ID number of contributing  
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7583.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : SA11AI.40646.0

Amount of Each Receipt this Period

100.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Margules, David, , ,

**C.** Mailing Address 1436 Bainbridge St

City  
Philadelphia

State  
PA

Zip Code  
19146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ballard Spahr

Occupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 27 2025

Transaction ID : SA11AI.40701

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution

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

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

1100.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

27939.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11AI.40701.0

Amount of Each Receipt this Period

1000.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

McDonald, Tom, , ,

Mailing Address 200 Massachusetts Ave NW  
Ste 500

City

Washington

State

DC

Zip Code

20001

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

Name of Employer

Occupation

Taft Law

Attorney

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025

Transaction ID : SA11AI.40797

Amount of Each Receipt this Period

500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Naim, Gideon, , ,

Mailing Address 1600 Hagys Ford Rd

City

Narberth

State

PA

Zip Code

19072

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

Name of Employer

Occupation

N/A

Retired

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 19 / 2025

Transaction ID : SA11AI.40666

Amount of Each Receipt this Period

500.00



Memo Item

Earmarked Contribution

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11AI.40666.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Oppenheimer, Marc, , ,

**B.**

Mailing Address 320 Brown St

City

Philadelphia

State

PA

Zip Code

19123

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Greenwood Racing, Inc.

Chief Marketing Officer

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : SA11AI.40731

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17689.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : SA11AI.40731.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

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

500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 27 OF 82

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Panitch, Alise, , ,

**A.**

Mailing Address 2113 Aqueduct Ln

City

Cherry Hill

State

NJ

Zip Code

08540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Advocare Grove Family Medical

Occupation

Attorney / Administrator

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : SA11AI.40753

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14009.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : SA11AI.40753.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Peck, Howard, , ,

**C.**

Mailing Address 2147 Hendricks Rd

City

Pennsburg

State

PA

Zip Code

18073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Senior Insurance Solutions LLC

Occupation

Insurance Broker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 17 2025

Transaction ID : SA11AI.40662

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

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

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

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 28 OF 82

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

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

C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025D D / Y Y Y Y Y  
17 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40662.0

Amount of Each Receipt this Period

500.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Pincus, Robert, B, ,

Mailing Address 108 Rockford Grove Ln

City

Wilmington

State

DE

Zip Code

19806

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

Name of Employer

Occupation

Skadden Arps

Attorney

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2025D D / Y Y Y Y Y  
09 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40752

Amount of Each Receipt this Period

1500.00



Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

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

C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

13509.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 09 / 2025D D / Y Y Y Y Y  
09 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.40752.0

Amount of Each Receipt this Period

1500.00



Memo Item

Conduit Contribution

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

1500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Rosin, Eric, , ,

**A.**

Mailing Address 109 Morningside Dr

City

Cherry Hill

State

NJ

Zip Code

08003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-employed

Occupation

Physician

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.40668

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : SA11AI.40668.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Ross, David, , ,

**C.**

Mailing Address 708 Edgehill rd

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ross Aronstam &amp; Moritz LLP

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.40726

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

2000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15509.44

Date of Receipt

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

Transaction ID : SA11AI.40726.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
Conduit Contribution**B.**

Full Name (Last, First, Middle Initial)

Rothschild, Carol, , ,

Mailing Address 1100 Lovering Ave

City

Wilmington

State

DE

Zip Code

19806

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

Name of Employer

Occupation

N/A

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.40717

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

21689.44

Date of Receipt

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

Transaction ID : SA11AI.40717.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

500.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Schimpf, Brian, , ,

**A.**

Mailing Address 1900 Ballycor Dr

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anduril Industries

Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 14 2025

Transaction ID : SA11AI.40622

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

ACTBLUE

**B.**

Mailing Address P.O. BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing  
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5653.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 14 2025

Transaction ID : SA11AI.40622.0

Amount of Each Receipt this Period

3500.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Schlanger, Marvin, O, ,

**C.**

Mailing Address 125 Via Quanteria

City

Palm Beach Gardens

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11AI.40665

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2025

Transaction ID : SA11AI.40665.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Conduit Contribution

Full Name (Last, First, Middle Initial)

Schoenberg, Joshua, , ,

**B.**

Mailing Address 600 Wynyard rd

City

Wilimington

State

DE

Zip Code

19803

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Schoenberg Memorial Chapel

Funeral Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11AI.40690

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

22939.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : SA11AI.40690.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Conduit Contribution

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

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

500.00

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

Use separate schedule(s)  
for each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Shulman, Jacqueline, , ,

**A.**

Mailing Address 1126 Penmore Pl

City  
Rydal

State  
AA

Zip Code  
19046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2025

Transaction ID : SA11AI.40728

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17009.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 11 / 2025

Transaction ID : SA11AI.40728.0

Amount of Each Receipt this Period

1500.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Stanger, Gail, , ,

**C.**

Mailing Address 5101 Atlantic Ave

City  
Ventnor

State  
NJ

Zip Code  
08406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11AI.40699

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution

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

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

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

26939.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11AI.40699.0

Amount of Each Receipt this Period

500.00

☒

Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Steinman, David, , ,

Mailing Address 190 Presidential Blvd  
Unit 417

City

Bala Cynwyd

State

PA

Zip Code

19004

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

Name of Employer

Occupation

Self-Employed

Physician

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11AI.40664

Amount of Each Receipt this Period

500.00

☐

Memo Item

Earmarked Contribution

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 17 / 2025

Transaction ID : SA11AI.40664.0

Amount of Each Receipt this Period

500.00

☒

Memo Item

Conduit Contribution

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

500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Weinstock, Jan, , ,

**A.**

Mailing Address 911 Spruce St

City

Philadelphia

State

PA

Zip Code

19107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gift of Life

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.40732

Amount of Each Receipt this Period

500.00

☐ Memo Item  
Earmarked Contribution

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18189.44

Date of Receipt

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

Transaction ID : SA11AI.40732.0

Amount of Each Receipt this Period

500.00

☒ Memo Item  
Conduit Contribution

Full Name (Last, First, Middle Initial)

Zuritsky, Joseph, S., ,

**C.**Mailing Address 1706 Rittenhouse Sq  
Unit 1801

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkway Corporation

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	5

Transaction ID : SA11AI.40677

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked Contribution**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	2	5

Transaction ID : SA11AI.40677.0

Amount of Each Receipt this Period

1000.00



Memo Item

Conduit Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

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

0.00

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

35600.00

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AFLAC PAC

A.

Mailing Address WORLDWIDE HEADQUARTERS

1932 WYNNTON ROAD

City

COLUMBUS

State

GA

Zip Code

31999

FEC ID number of contributing  
federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2025

Transaction ID : SA11C.40781

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLISON TRANSMISSION INC. POLITICAL ACTION COMMITTEE

B.

Mailing Address ONE ALLISON WAY

City

INDIANAPOLIS

State

IN

Zip Code

46222

FEC ID number of contributing  
federal political committee.

C C00691972

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11C.40790

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICA'S CREDIT UNIONS PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC.

C.

Mailing Address 99 M ST, SE

SUITE 300

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11C.40778

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

6500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE****A.**Mailing Address 101 CONSTITUTION AVE., NW  
SUITE 700

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2025

Transaction ID : SA11C.40686

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE****B.**

Mailing Address 101 NORTH 3RD STREET

City

MOORHEAD

State

MN

Zip Code

56560

FEC ID number of contributing  
federal political committee.**C** C00110338

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 13 / 2025

Transaction ID : SA11C.40771

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE****C.**

Mailing Address 80 F STREET, NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00009936

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 13 / 2025

Transaction ID : SA11C.40768

Amount of Each Receipt this Period

1000.00



Memo Item

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

6000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF STATE COUNTY &amp; MUNICIPAL EMPLOYEES P E O P L E

**A.**

Mailing Address 1625 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00011114

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11C.40765

Amount of Each Receipt this Period

2500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF TEACHERS, AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE, NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00028860

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

Transaction ID : SA11C.40787

Amount of Each Receipt this Period

5000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1

220 LEIGH FARM RD

City

DURHAM

State

NC

Zip Code

27707

FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

Transaction ID : SA11C.40764

Amount of Each Receipt this Period

2500.00



Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

32939.44

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2025

Transaction ID : SA11C.40786

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 1505 PRINCE STREET  
SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

**C** C00024968

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2025

Transaction ID : SA11C.40785

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERIPRISE FINANCIAL INC. POLITICAL ACTION COMMITTEE (AMERIPRISE PAC)

**C.**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 701B EAST

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00414474

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 20 2025

Transaction ID : SA11C.40777

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

9000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)**

Mailing Address 1101 WILSON BLVD.

City  
ARLINGTONState  
VAZip Code  
22209FEC ID number of contributing  
federal political committee.**C** C00281212

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

Transaction ID : SA11C.40774

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BAKER & HOSTETLER POLITICAL ACTION COMMITTEE**Mailing Address 1050 CONNECTICUT AVENUE, N.W.,  
SUITE 1100City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00174227

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.40780

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)**Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EASTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00141218

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11C.40796

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FAA Managers Association PAC (FAAMA PAC)

**A.**

Mailing Address 245 Buchanan St

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00366070

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11C.40792

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

HUMANE WORLD ACTION FUND POLITICAL ACTION COMMITTEE

Mailing Address 1255 23RD STREET, NW  
SUITE 455

City

WASHINGTON

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.**C** C00466813

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11C.40794

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF SHEET METAL, AIR, RAIL AND TRANSPORTATION WORKERS POLITICAL A

Mailing Address 1750 NEW YORK AVENUE, NW  
SUITE 600

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00007542

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11C.40763

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

8500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

L3HARRIS TECHNOLOGIES, INC. PAC

**A.**Mailing Address 600 MARYLAND AVENUE SW  
SUITE 850ECity  
WASHINGTONState  
DCZip Code  
20024FEC ID number of contributing  
federal political committee.**C** C00100321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : SA11C.40687

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NAMMO INC EMPLOYEE POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 2000 14TH ST N #250

City  
ARLINGTONState  
VAZip Code  
22201FEC ID number of contributing  
federal political committee.**C** C00709956

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.40776

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION AMERICA'S ELECTRIC COOPERATIVES PAC

**C.**

Mailing Address 4301 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.40767

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION****A.**

Mailing Address 1201 16TH STREET NW STE 418

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00003251

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11C.40793

Amount of Each Receipt this Period

2000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

**PARSONS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 100 WEST WALNUT ST. T-1110

City

PASADENA

State

CA

Zip Code

91124

FEC ID number of contributing  
federal political committee.**C** C00103549

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

Transaction ID : SA11C.40773

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL FEDERAL PAC**Mailing Address 751 BROAD STREET  
14TH FLOOR

City

NEWARK

State

NJ

Zip Code

07102

FEC ID number of contributing  
federal political committee.**C** C00127779

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

Transaction ID : SA11C.40775

Amount of Each Receipt this Period

2500.00



Memo Item

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

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PURPOSE PAC****A.**Mailing Address 600 PENNSYLVANIA AVE SE  
#15180City  
WASHINGTONState  
DCZip Code  
20003FEC ID number of contributing  
federal political committee.**C** C00497131

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11C.40788

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SEAFARERS POLITICAL ACTIVITY DONATION - SEAFARERS INTERNATIONAL UNION OF NA-AGLIW

Mailing Address 5201 AUTH WAY

City  
CAMP SPRINGSState  
MDZip Code  
20746FEC ID number of contributing  
federal political committee.**C** C00004325

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11C.40772

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

T-MOBILE US, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 800 NORTH BLDG.City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00361758

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.40769

Amount of Each Receipt this Period

1000.00

☐ Memo Item

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)****A.**Mailing Address 601 THIRTEENTH STREET, NW  
SUITE 700 NORTHCity  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00431361

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		20		2025	

Transaction ID : SA11C.40782

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE BOEING COMPANY POLITICAL ACTION COMMITTEE****B.**

Mailing Address 929 LONG BRIDGE DRIVE

City  
ARLINGTONState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.**C** C00142711

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		13		2025	

Transaction ID : SA11C.40770

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE BOEING COMPANY POLITICAL ACTION COMMITTEE****C.**

Mailing Address 929 LONG BRIDGE DRIVE

City  
ARLINGTONState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.**C** C00142711

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		31		2025	

Transaction ID : SA11C.40779

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE****A.**

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00008268

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11C.40783

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name (Last, First, Middle Initial)

**UNITED PARCEL SERVICE INC. PAC****B.**

Mailing Address 55 GLENLAKE PARKWAY NE

City

ATLANTA

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.**C** C00064766

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11C.40784

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name (Last, First, Middle Initial)

**WESTINGHOUSE ELECTRIC COMPANY LLC PAC****C.**Mailing Address 1775 PENNSYLVANIA AVE NW  
SUITE 250

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.**C** C00346361

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.40766

Amount of Each Receipt this Period

1000.00



Memo Item

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

11000.00

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

74000.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TD Bank

**A.**

Mailing Address 101 Haddonfield Rd

City

Cherry Hill

State

NJ

Zip Code

08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

12778.26

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA15.40801

Amount of Each Receipt this Period

4142.67



Memo Item

Interest Received

Full Name (Last, First, Middle Initial)

TD Bank

**B.**

Mailing Address 101 Haddonfield Rd

City

Cherry Hill

State

NJ

Zip Code

08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

12778.47

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 31 2025

Transaction ID : SA15.40802

Amount of Each Receipt this Period

0.21



Memo Item

Interest Received

Full Name (Last, First, Middle Initial)

TD Bank

**C.**

Mailing Address 101 Haddonfield Rd

City

Cherry Hill

State

NJ

Zip Code

08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

12778.67

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : SA15.40803

Amount of Each Receipt this Period

0.20



Memo Item

Interest Received

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

4143.08

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
TD Bank

**A.**

Mailing Address 101 Haddonfield Rd

City  
Cherry Hill

State  
NJ

Zip Code  
08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16600.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2025

Transaction ID : SA15.40804

Amount of Each Receipt this Period

3821.37

☐ Memo Item  
Interest Received

Full Name (Last, First, Middle Initial)  
TD Bank

**B.**

Mailing Address 101 Haddonfield Rd

City  
Cherry Hill

State  
NJ

Zip Code  
08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16600.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2025

Transaction ID : SA15.40805

Amount of Each Receipt this Period

0.21

☐ Memo Item  
Interest Received

Full Name (Last, First, Middle Initial)  
TD Bank

**C.**

Mailing Address 101 Haddonfield Rd

City  
Cherry Hill

State  
NJ

Zip Code  
08002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20960.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2025

Transaction ID : SA15.40806

Amount of Each Receipt this Period

4359.99

☐ Memo Item  
Interest Received

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

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

8181.57

12324.65

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

140.04

Transaction ID : SB17.40619

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.59

Transaction ID : SB17.40628

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

69.33

Transaction ID : SB17.40635

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

210.96

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.55

Transaction ID : SB17.40636

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101Purpose of Disbursement  
Candidate Expenses - Itemized

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2723.83

Transaction ID : SB17.40888

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**

Mailing Address 440 Terry Ave

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

94.68

Transaction ID : SB17.40888.1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2728.38

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 440 Terry Ave

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

782.62

Transaction ID : SB17.40888.2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**

Mailing Address 440 Terry Ave

City  
SeattleState  
WAZip Code  
98109Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

260.41

Transaction ID : SB17.40888.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Smith**Mailing Address 901 F Street  
NWCity  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Meeting / Meal

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

221.10

Transaction ID : SB17.40888.5

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 82

<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Prime Rib**Mailing Address 2020 K Street NW  
Front 3City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Meeting / Meal

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

442.95

Transaction ID : SB17.40888.6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Succotash Prime**Mailing Address 915 F St  
NWCity  
WashingtonState  
DCZip Code  
20004Purpose of Disbursement  
Meeting / Meal

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

184.84

Transaction ID : SB17.40888.8

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capocaccia**

Mailing Address Rue de la Rotisserie 6

City  
Geneve, SwitzerlandState  
ZZZip Code  
00000Purpose of Disbursement  
Meeting / Meal

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

202.64

Transaction ID : SB17.40888.11

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 82

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Meeting / Meal

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

106.01

Transaction ID : SB17.40888.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T Mobility**

Mailing Address PO Box 6463

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Telecommunications Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

277.53

Transaction ID : SB17.40825

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 6463

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Telecommunications Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

391.73

Transaction ID : SB17.40844

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

669.26

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Bowman & Company LLP**

Mailing Address 601 White Horse Rd

City  
VoorheesState  
NJZip Code  
08043Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.40829

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Caffè Aldo Lamberti**

Mailing Address 2011 Route 70 West

City  
Cherry HillState  
NJZip Code  
08002Purpose of Disbursement  
Fundraising Reception Expense

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

725.00

Transaction ID : SB17.40858

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.40661

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1200.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.40675

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.48

Transaction ID : SB17.40747

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

284.00

Transaction ID : SB17.40723

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

634.48

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.40722

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

140.00

Transaction ID : SB17.40684

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democracy Engine, LLC**Mailing Address 416 Florida Ave NW  
#26418City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Processing Fees

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

312.50

Transaction ID : SB17.40702

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

552.50

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Eckert & Associates**

Mailing Address PO Box 15402

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Consulting Services Expense - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : SB17.40827

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eckert & Associates**

Mailing Address PO Box 15402

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Consulting Services Expense - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : SB17.40839

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Eckert & Associates**

Mailing Address PO Box 15402

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Consulting Services Expense - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : SB17.40851

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11250.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. IMAW - Int'l Assoc of Matchinists & Aerospace Workers**

Mailing Address 9000 Machinists Place

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

City  
Upper MarlboroState  
MDZip Code  
20772

FEC Identification Number

**C**Purpose of Disbursement  
Fundraising Site Rental

003

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.40813

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. Jewish Community Voice**Mailing Address 1301 Springdale Rd  
Suite 250

Date of Disbursement

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

City  
Cherry HillState  
NJZip Code  
08003

FEC Identification Number

**C**Purpose of Disbursement  
Advertising

004

Amount of Each Disbursement this Period

578.00

Transaction ID : SB17.40846

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. NGP Van**Mailing Address 1445 New York Ave NW  
Suite 200

Date of Disbursement

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

City  
WashingtonState  
DCZip Code  
20005

FEC Identification Number

**C**Purpose of Disbursement  
Database Services

001

Amount of Each Disbursement this Period

11370.00

Transaction ID : SB17.40807

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

12448.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

83.00

Transaction ID : SB17.40809

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

166.00

Transaction ID : SB17.40810

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.40811

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

549.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

83.00

Transaction ID : SB17.40834

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

166.00

Transaction ID : SB17.40835

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.40836

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

549.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

83.00

Transaction ID : SB17.40847

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

166.00

Transaction ID : SB17.40848

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NJ Manufacturers Insurance Co**

Mailing Address 301 Sullivan Way

City  
West TrentonState  
NJZip Code  
08628Purpose of Disbursement  
Insurance Expense

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.40849

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

549.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Pittman, Anthony, R, , Jr.**

Mailing Address 20 Scenic View Dr

City  
SicklervilleState  
NJZip Code  
08081Purpose of Disbursement  
Consulting Services Expense - Advance

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.40828

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RP Consulting, LLC**

Mailing Address PO Box 3540

City  
Cherry HillState  
NJZip Code  
08034Purpose of Disbursement  
Consulting Services Expense - Fundraising & Compliance

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : SB17.40826

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RP Consulting, LLC**

Mailing Address PO Box 3540

City  
Cherry HillState  
NJZip Code  
08034Purpose of Disbursement  
Consulting Services Expense - Fundraising & Compliance

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : SB17.40838

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 82

<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RP Consulting, LLC**

Mailing Address PO Box 3540

City  
Cherry HillState  
NJZip Code  
08034Purpose of Disbursement  
Consulting Services Expense - Fundraising & Compliance

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : SB17.40850

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Runyan Holdings, LLC**

Mailing Address 8 E Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Site Rental

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.40812

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Runyan Holdings, LLC**

Mailing Address 8 E Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Site Rental

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.40845

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

17.05

Transaction ID : SB17.40814

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

294.63

Transaction ID : SB17.40815

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

206.32

Transaction ID : SB17.40816

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

518.00

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SB17  
Transaction ID : SB17.40814

All transactions below itemizable threshold.

Form/Schedule: SB17  
Transaction ID: SB17.40815

All transactions below itemizable threshold.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.40816

Balance of transactions below itemizable threshold.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 82

<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

64.10

Transaction ID : SB17.40816.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

52.66

Transaction ID : SB17.40816.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.86

Transaction ID : SB17.40816.3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 82

<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1922.55

Transaction ID : SB17.40840

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lansdowne Resort**

Mailing Address 44050 Woodridge Pkwy

City  
LeesburgState  
VAZip Code  
20176Purpose of Disbursement  
Travel - Lodging

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1775.00

Transaction ID : SB17.40840.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. US House of Representatives Gift Shop**

Mailing Address Longworth Bldg

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
Gifts Expense

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

147.55

Transaction ID : SB17.40840.1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1922.55

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

205.97

Transaction ID : SB17.40841

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

54.57

Transaction ID : SB17.40841.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

48.48

Transaction ID : SB17.40841.1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

205.97

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.40841

Balance of transactions below itemizable threshold.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 82

<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

58.92

Transaction ID : SB17.40841.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

77.05

Transaction ID : SB17.40842

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EZ Pass**

Mailing Address PO Box 4973

City  
TrentonState  
NJZip Code  
08650Purpose of Disbursement  
Travel Expense - Tolls

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.40842.1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

77.05

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.40842

Balance of transactions below itemizable threshold.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Annual Credit Card Fee

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.40859

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

58.00

Transaction ID : SB17.40860

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

949.71

Transaction ID : SB17.40861

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1157.71

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.40860

All transactions below itemizable threshold.

Form/Schedule: SB17

Transaction ID: SB17.40861

Balance of transactions below itemizable threshold.

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. National Democratic Club**

Mailing Address 30 Ivy St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Reception Expense

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

663.97

Transaction ID : SB17.40861.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Root & Stem Catering**Mailing Address 2941 Fairview Park Dr  
Ste 110City  
Falls ChurchState  
VAZip Code  
22042Purpose of Disbursement  
Fundraising Catering

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

208.69

Transaction ID : SB17.40861.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. EZ Pass**

Mailing Address PO Box 4973

City  
TrentonState  
NJZip Code  
08650Purpose of Disbursement  
Travel Expense - Tolls

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.40861.3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TD Card Services**

Mailing Address PO Box 84037

City  
ColumbusState  
GAZip Code  
31908Purpose of Disbursement  
Credit Card Payment - Itemized

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

202.53

Transaction ID : SB17.40862

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

49.06

Transaction ID : SB17.40862.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

Candidate Name

Office Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

37.85

Transaction ID : SB17.40862.2

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

202.53

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

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SB17

Transaction ID : SB17.40862

Balance of transactions below itemizable threshold.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Go Green N Clean Car Wash**

Mailing Address 11 Lakeview Dr N

City  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Campaign Vehicle Maintenance Expense

002

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

22.00

Transaction ID : SB17.40862.3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Wawa #8453**Mailing Address 3 Lakeview Dr  
NCity  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Travel Expense - Gas

002

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.62

Transaction ID : SB17.40862.4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Go Green N Clean Car Wash**

Mailing Address 11 Lakeview Dr N

City  
GibbsboroState  
NJZip Code  
08026Purpose of Disbursement  
Campaign Vehicle Maintenance Expense

002

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

22.00

Transaction ID : SB17.40862.5

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. The Echo Group, LLC**

Mailing Address PO Box 15069

City  
PhiladelphiaState  
PAZip Code  
19130Purpose of Disbursement  
Consulting Services Expense - Communications

001

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.40808

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Echo Group, LLC**

Mailing Address PO Box 15069

City  
PhiladelphiaState  
PAZip Code  
19130Purpose of Disbursement  
Consulting Services Expense - Communications

001

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.40824

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Echo Group, LLC**

Mailing Address PO Box 15069

City  
PhiladelphiaState  
PAZip Code  
19130Purpose of Disbursement  
Consulting Services Expense - Communications

001

Candidate Name

Category/  
TypeOffice Sought:  

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:  

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.40843

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

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

53424.39

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. Food Bank of South Jersey**

Mailing Address 1501 John Tipton Blvd

City  
PennsaukenState  
NJZip Code  
08110Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : SB21.40855

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Maryville Addiction Treatment Center**Mailing Address 129 Johnson Rd  
Ste 7City  
TurnersvilleState  
NJZip Code  
08012Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : SB21.40857

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NJSCNAACP**Mailing Address 4326 Harbor Beach Blvd  
#775City  
BrigantineState  
NJZip Code  
08203Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12000.00

Transaction ID : SB21.40854

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

36000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**DONALD NORCROSS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RIPPAC / Rowan University Foundation**

Mailing Address 201 Mullica Hill Rd

City  
GlassboroState  
NJZip Code  
08028Purpose of Disbursement  
Donation / Sponsor

012

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : SB21.40830

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Steve Sweeney for Governor**

Mailing Address PO Box 364

City  
WenonahState  
NJZip Code  
08090Purpose of Disbursement  
Contribution Non-Federal

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5800.00

Transaction ID : SB21.40832

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7050.00

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

43050.00