

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

NORPAC

ADDRESS (number and street) PO Box 5595  
 Check if different than previously reported. (ACC)  
Englewood NJ 07631

2. **FEC IDENTIFICATION NUMBER** C00247403  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  Jun 20 (M6)  Oct 20 (M10)  
 Mar 20 (M3)  Jul 20 (M7)  Jan 31 (YE)  
 Apr 20 (M4)  Nov 20 (M11) (Non-Election Year Only)  
 Dec 20 (M12) (Non-Election Year Only)  
(c) 12-Day Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 PRE-Election  Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2008 through 05 31 2008

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 Rachel Feldman

Signature of Treasurer Electronically Filed by Rachel Feldman Date 08 19 2008

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

Office Use Only								
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		491423.12
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	562376.87									
(c) Total Receipts (from Line 19) .....	56981.55	245760.46								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	619358.42	737183.58								
7. Total Disbursements (from Line 31) .....	115938.13	233763.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	503420.29	503420.29								
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									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
NORPAC

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	36420.35	176266.35
(i) Itemized (use Schedule A) .....	19117.00	61878.00
(ii) Unitemized .....	55537.35	238144.35
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	55537.35	238144.35
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	44.10
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1444.20	7572.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	56981.55	245760.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	56981.55	245760.46

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	98428.13	165744.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	98428.13	165744.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17510.00	64819.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3200.00
(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 28(a), (b), and (c)) .....	0.00	3200.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	115938.13	233763.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	115938.13	233763.29

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	55537.35	238144.35
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	55537.35	234944.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	98428.13	165744.29
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	98428.13	165744.29

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

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

FOR LINE NUMBER: PAGE 6 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
NORPAC

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

Mailing Address 900 Cedarhurst Street

City State Zip Code  
North Woodmere NY 11581

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Furniture Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 15 / 2008  
Transaction ID: SA11AI.21998  
Amount of Each Receipt this Period 300.00

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

Mailing Address 1290 Trafalgar St.

City State Zip Code  
Teaneck NJ 07666

FEC ID number of contributing federal political committee. C

Name of Employer Goldman Sachs Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.21866  
Amount of Each Receipt this Period 425.00

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

Mailing Address 585 Albro Lane

City State Zip Code  
Lawrence NY 11559

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 09 / 2008  
Transaction ID: SA11AI.21813  
Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1025.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 117A East palisade ave

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Chiropractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 11 / 2008  
Transaction ID: SA11AI.21838  
Amount of Each Receipt this Period 300.00

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

Mailing Address 11 Riverside Dr.

City New York State NY Zip Code 10023

FEC ID number of contributing federal political committee. C

Name of Employer Kramer Levin Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.21729  
Amount of Each Receipt this Period 2000.00

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

Mailing Address 130 Dwight Pl.

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.22042  
Amount of Each Receipt this Period 1000.00

check to Lautenberg for Senate  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 2300.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alan Berger</p> <p>Mailing Address 24 Sutton Pl.</p> <p>City State Zip Code Englewood NJ 07631</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self Occupation Physician</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">125.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 05 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.22075</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>credit card to Stevens for Senate Cmte</p> <p><b>[MEMO ITEM]</b></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Elliott Berman</p> <p>Mailing Address 537 Rutland Avenue</p> <p>City State Zip Code Teaneck NJ 07666</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer IDT Corporation Occupation Attorney</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 07 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.21783</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">300.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Joshua Bernheim</p> <p>Mailing Address 83 Westminster Avenue</p> <p>City State Zip Code Bergenfield NJ 07621</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self Occupation Physician</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">550.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">05 / 14 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.21982</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">550.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">850.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Susan Bernstein  
 Mailing Address 424 Cedar Lane  
 City East Meadow State NY Zip Code 11554  
 Date of Receipt MM / DD / YYYY  
05 / 02 / 2008  
**Transaction ID:** SA11AI.21744  
 Amount of Each Receipt this Period 350.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 350.00

**B.** Full Name (Last, First, Middle Initial)  
Jonathan Blank  
 Mailing Address 20 Ferris Dr  
 City West Orange State NJ Zip Code 07052  
 Date of Receipt MM / DD / YYYY  
05 / 15 / 2008  
**Transaction ID:** SA11AI.21997  
 Amount of Each Receipt this Period 300.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NJAA Occupation MD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 300.00

**C.** Full Name (Last, First, Middle Initial)  
Rachel Blazer  
 Mailing Address 170 West End Avenue Apt 6A  
 City New York State NY Zip Code 10023  
 Date of Receipt MM / DD / YYYY  
05 / 11 / 2008  
**Transaction ID:** SA11AI.21850  
 Amount of Each Receipt this Period 350.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer n/a Occupation Home maker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 350.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00  
**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 10 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 139 Huguenot Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 05 / 2008

Transaction ID: SA11AI.21759

Amount of Each Receipt this Period 300.00

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

Mailing Address 139 Huguenot Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 12 / 2008

Transaction ID: SA11AI.21865

Amount of Each Receipt this Period 125.00

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

Mailing Address 4 Kinzel Lane

City West Orange State NJ Zip Code 07052

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 14 / 2008

Transaction ID: SA11AI.21990

Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 550.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 88  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 4 Kinzel Lane

City State Zip Code  
West Orange NJ 07052

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

Name of Employer Self Occupation  
Self Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1295.17

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.22149

Amount of Each Receipt this Period  
845.17

In-kind - Mission exp see memo text

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

Mailing Address 668 Westwood Avenue

City State Zip Code  
Long Branch NJ 07740

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

Name of Employer self Occupation  
self dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 2 / 2 0 0 8

**Transaction ID:** SA11AI.21889

Amount of Each Receipt this Period  
300.00

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

Mailing Address 290 NW 165 St P600

City State Zip Code  
Miami FL 33169

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

Name of Employer Self Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

**Transaction ID:** SA11AI.21685

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1495.17

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ben Chouake	Date of Receipt MM / DD / YYYY 05 / 07 / 2008
	Mailing Address 245 Hutchinson Rd.	<b>Transaction ID:</b> SA11AI.22061
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	credit card to Stevens for Senate Cmte
Name of Employer Self Occupation MD	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 2125.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Esther Chouake	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 245 Hutchinson Rd.	<b>Transaction ID:</b> SA11AI.22044
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 950.00
	FEC ID number of contributing federal political committee. <b>C</b>	credit card to Lautenberg for Senate
Name of Employer Self Occupation MD	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ .00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Esther Chouake	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 245 Hutchinson Rd.	<b>Transaction ID:</b> SA11AI.22046
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	credit card to Lautenberg for Senate
Name of Employer Self Occupation MD	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Esther Chouake

Mailing Address 245 Hutchinson Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation MD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.22062

Amount of Each Receipt this Period  
 2300.00

Credit Card to Stevens for Senate Cmte

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Arline Duker

Mailing Address 189 Carlton Ter

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Social Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.22043

Amount of Each Receipt this Period  
 1000.00

check to Lautenberg for Senate

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Michael Ehrenich

Mailing Address 354 Charlton Avenue

City South Orange State NJ Zip Code 07079

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

Name of Employer SOMA Intelligence, LLC Occupation MD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 7 / 2 0 0 8

**Transaction ID:** SA11AI.22026

Amount of Each Receipt this Period  
 500.00

credit card to Coleman for Senate

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Reuven Escott  
Mailing Address 55 Regent St.  
City Bergenfield State NJ Zip Code 07621  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Securities Trader  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 125.00  
Date of Receipt 05 / 05 / 2008  
Transaction ID: SA11AI.22069  
Amount of Each Receipt this Period 500.00  
credit card to Stevens for Senate Cmte  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Reuven Escott  
Mailing Address 55 Regent St.  
City Bergenfield State NJ Zip Code 07621  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Securities Trader  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 05 / 21 / 2008  
Transaction ID: SA11AI.22114  
Amount of Each Receipt this Period 100.00  
In-kind - tip for bus driver on Mission

**C.** Full Name (Last, First, Middle Initial)  
Deborah Feuer  
Mailing Address 312 Broad Avenue  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00  
Date of Receipt 05 / 09 / 2008  
Transaction ID: SA11AI.21815  
Amount of Each Receipt this Period 700.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 15 / 88</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 349 Starling Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer QBCC Occupation Teacher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 07 / 2008  
**Transaction ID: SA11AI.21790**  
 Amount of Each Receipt this Period: 275.00

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

Mailing Address 300 Sunset Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Abeles & Heymann Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 15 / 2008  
**Transaction ID: SA11AI.21996**  
 Amount of Each Receipt this Period: 300.00

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

Mailing Address 826 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation MD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt: 05 / 04 / 2008  
**Transaction ID: SA11AI.21750**  
 Amount of Each Receipt this Period: 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Mort Fridman  
Mailing Address 826 Winthrop Rd  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation MD  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00  
Date of Receipt 05 / 05 / 2008  
Transaction ID: SA11AI.22070  
Amount of Each Receipt this Period 500.00  
credit card to Stevens for Senate Cmte  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mort Fridman  
Mailing Address 826 Winthrop Rd  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation MD  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00  
Date of Receipt 05 / 29 / 2008  
Transaction ID: SA11AI.22045  
Amount of Each Receipt this Period 500.00  
credit card to Lautenberg for Senate  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Beth Fried  
Mailing Address 140 Walnut St  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00  
Date of Receipt 05 / 13 / 2008  
Transaction ID: SA11AI.21915  
Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 17 / 88
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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ellen Friedman	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 194 Carlton Terrace	<b>Transaction ID:</b> SA11AI.21692
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self Occupation Self Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James Gelfand	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 15 Ward Drive	<b>Transaction ID:</b> SA11AI.22006
	City State Zip Code New Rochelle NY 10804	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self Occupation Self Dentist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Anne Gontownik	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 250 Mountain Rd.	<b>Transaction ID:</b> SA11AI.22047
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer none Occupation homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 125.00	check to Lautenberg for Senate <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Anne Gontownik  
Mailing Address 250 Mountain Rd.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation homemaker  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 125.00  
Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.22065  
Amount of Each Receipt this Period 1800.00  
check to Stevens for Senate Cmte  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Jerry Gontownik  
Mailing Address 250 Mountain Rd.  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Stone Post Realty Occupation Real Estate  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 275.00  
Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.22035  
Amount of Each Receipt this Period 1600.00  
check to McConnell Senate Committee 08  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert Goodman  
Mailing Address 473 Winthrop Rd.  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Columbia University Occupation Physician  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 525.00  
Date of Receipt 05 / 08 / 2008  
Transaction ID: SA11AI.22066  
Amount of Each Receipt this Period 1000.00  
credit card to Stevens for Senate Cmte  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... **0.00**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Goodman	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 473 Winthrop Rd.	<b>Transaction ID:</b> SA11AI.22041
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. <b>C</b>	credit card to Lautenberg for Senate
Name of Employer Columbia University	Occupation Physician	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sarah Goodman	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 473 Winthrop Rd	<b>Transaction ID:</b> SA11AI.22040
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 1700.00
	FEC ID number of contributing federal political committee. <b>C</b>	check to Lautenberg for Senate
Name of Employer Self	Occupation Social Worker	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul J. Goodnick	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 123 S Adelaide Ave 4E	<b>Transaction ID:</b> SA11AI.21762
	City State Zip Code Highland Park NJ 08904	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Carrier Clinic	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) Robert M. Gottesman		Date of Receipt MM / DD / YYYY 05 / 09 / 2008
Mailing Address 285 Sunset Avenue		Transaction ID: SA11AI.22076
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation CPA	check to Stevens for Senate Cmte  <b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Robert M. Gottesman		Date of Receipt MM / DD / YYYY 05 / 15 / 2008
Mailing Address 285 Sunset Avenue		Transaction ID: SA11AI.21708
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Self	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

**C.**

Full Name (Last, First, Middle Initial) Miriam Greenspan		Date of Receipt MM / DD / YYYY 05 / 06 / 2008
Mailing Address 545 Winthrop Road		Transaction ID: SA11AI.21693
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer n/a	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	425.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Ella Gurevich

Mailing Address 715 Park Avenue

City State Zip Code  
New York NY 10021

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

Name of Employer Self Occupation  
Real estate equity investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** SA11AI.21881

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Jack Halpern

Mailing Address 160 W. 66th St.

City State Zip Code  
New York NY 10023

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

Name of Employer Atlantic Realty Occupation  
Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2008

**Transaction ID:** SA11AI.22063

Amount of Each Receipt this Period  
2000.00

credit card to Stevens for Senate Cmte

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Andrew Herenstein

Mailing Address 3 Dogwood Lane

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Quadrangle Occupation  
Managing Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
05 / 12 / 2008

**Transaction ID:** SA11AI.21886

Amount of Each Receipt this Period  
425.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **725.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 286 Booth Avenue

City Englewood State NJ Zip Code 07631

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

Name of Employer Ernst & Young Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 13 / 2008  
Transaction ID: SA11AI.21891  
Amount of Each Receipt this Period 300.00

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

Mailing Address 637 Forest Dr

City Teaneck State NJ Zip Code 07666

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

Name of Employer The Heschel School, NY Occupation Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 05 / 30 / 2008  
Transaction ID: SA11AI.22048  
Amount of Each Receipt this Period 250.00

check to Lautenberg for Senate  
[MEMO ITEM]

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

Mailing Address 704 Rosedale Road

City Princeton State NJ Zip Code 08540

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

Name of Employer Inst. of Scientific Studies Occupation Academic

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.22028  
Amount of Each Receipt this Period 150.00

credit card to Coleman for Senate  
[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) ..... ► 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Elaine Jacobs	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 480 Cumberland Road	Transaction ID: SA11AI.22077
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	check to Stevens for Senate Cmte
Name of Employer n/a Occupation Homemaker	<b>[MEMO ITEM]</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ .00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Shira Jacobs	Date of Receipt MM / DD / YYYY 05 / 11 / 2008
	Mailing Address 118 Dana Pl	Transaction ID: SA11AI.21855
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self Occupation Design		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 350.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Harry Junger	Date of Receipt MM / DD / YYYY 05 / 08 / 2008
	Mailing Address 561 West 230th St	Transaction ID: SA11AI.21800
	City State Zip Code Bronx NY 10463	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self Occupation Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 24 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Haina Just-Michael

Mailing Address 33 Silver Birch Drive

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Self Occupation  
Media Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2008

Transaction ID: SA11AI.21740

Amount of Each Receipt this Period  
300.00

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

Mailing Address 315 North Ave

City State Zip Code  
Westport CT 06880

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

Name of Employer Self Occupation  
Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.21733

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 535 Barnard Ave

City State Zip Code  
Woodmere NY 11598

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

Name of Employer Self Occupation  
Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2008

Transaction ID: SA11AI.21737

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5550.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 30 Cardine Court

City State Zip Code  
Closter NJ 07624

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

Name of Employer Federal Drug Agents Foundation  
Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 9 / 2 0 0 8

**Transaction ID:** SA11AI.21696

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 119 Bennett Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Columbia U  
Occupation Student

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.21956

Amount of Each Receipt this Period  
125.00

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

Mailing Address 280 Jones Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Self  
Occupation Finance

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 8 / 2 0 0 8

**Transaction ID:** SA11AI.22064

Amount of Each Receipt this Period  
2000.00

check to Stevens for Senate Cmte

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2625.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 88  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Randall Krakauer

Mailing Address 29 Lorrie Lane

City State Zip Code  
Princeton Junction NJ 08550

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

Name of Employer Occupation  
Aetna Medical Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2008

Transaction ID: SA11AI.22067

Amount of Each Receipt this Period  
1000.00

check to Stevens for Senate Cmte

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
none Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.22105

Amount of Each Receipt this Period  
700.00

check to McCain GELAC

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
none Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.22106

Amount of Each Receipt this Period  
2300.00

check to McCain Victory 08

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Kevin Lemmer

Mailing Address 140 Downey Dr.

City State Zip Code  
Tenafly NJ 07670

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

Name of Employer  
ADAR Investment Management

Occupation  
Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.22082

Amount of Each Receipt this Period

500.00

credit card to Stevens for  
Senate Cmte

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Sallie Levi

Mailing Address 617 North Forest Drive

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer  
Self

Occupation  
Attorney/Realtor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.21768

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)  
Syma Levine

Mailing Address 491 Bell Street

City State Zip Code  
West Hempstead NY 11552

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

Name of Employer  
Self

Occupation  
Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: SA11AI.21877

Amount of Each Receipt this Period

125.00

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

475.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Donald Liss

Mailing Address 3020 Arlington Avenue

City State Zip Code  
Riverdale NY 10463

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

Name of Employer Self Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

Transaction ID: SA11AI.21959

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Julie Lobel

Mailing Address 53 Walnut Court

City State Zip Code  
Englewood NJ 07631

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

Name of Employer n/a Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2008

Transaction ID: SA11AI.21804

Amount of Each Receipt this Period  
275.00

**C.**

Full Name (Last, First, Middle Initial)  
Michael Lustig

Mailing Address 171 West 71st St Apt 6A

City State Zip Code  
New York NY 10023

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

Name of Employer Black Rock, Inc. Occupation Portfolio Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

Transaction ID: SA11AI.21738

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3275.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 50 Bayberry Road

City State Zip Code  
Lawrence NY 11559

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

Name of Employer Self Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2008

**Transaction ID:** SA11AI.21794

Amount of Each Receipt this Period  
300.00

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

Mailing Address 232 Hutchinson Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer self Occupation  
merchant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2008

**Transaction ID:** SA11AI.21839

Amount of Each Receipt this Period  
275.00

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

Mailing Address 54 Dana Pl

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Sothebys Occupation  
Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2008

**Transaction ID:** SA11AI.21903

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **875.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Jason Muss  
Mailing Address 181 East 90th  
City New York State NY Zip Code 10128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Muss Development Corp Occupation Real Estate Developer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 125.00  
Date of Receipt 05 / 23 / 2008  
Transaction ID: SA11AI.22068  
Amount of Each Receipt this Period 1000.00  
check to Stevens for Senate Cmte  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Nina Nanasi  
Mailing Address 265 Mountain Road  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 08 / 2008  
Transaction ID: SA11AI.21799  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Rachel Neumark-Herlands  
Mailing Address 115 Central Park West  
City New York State NY Zip Code 10023  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Jewlery  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 05 / 07 / 2008  
Transaction ID: SA11AI.21778  
Amount of Each Receipt this Period 225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 525.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph Paradis	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 35 Mountain Ridge Dr	<b>Transaction ID:</b> SA11AI.22020
	City State Zip Code Livingston NJ 07039	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Check to Landrieu for Senate
	Name of Employer Edison Village Association Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date .00	<b>[MEMO ITEM]</b>

<b>B.</b>	Full Name (Last, First, Middle Initial) Yitzhak Pastreich	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 547 West 27th Street Room 613	<b>Transaction ID:</b> SA11AI.21833
	City State Zip Code New York NY 10001	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Real Estate developer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stephen Paul	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 61 Howell Dr.	<b>Transaction ID:</b> SA11AI.22049
	City State Zip Code West Orange NJ 07052	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	check to Lautenberg for Senate
	Name of Employer Princeton U Occupation Research Physicist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 175.00	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	275.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 32 / 88
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Michael Rabin

Mailing Address 325 Mansfield Street

City State Zip Code  
Highland Park NJ 08904

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

Name of Employer Occupation  
Premier Therapy Services Physical therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21892

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Chaim Rosen

Mailing Address 51 Dana Pl

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
Valley Hospital physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.22078

Amount of Each Receipt this Period  
200.00

check to Stevens for Sena-  
te Cmte

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Carolyn Rosenberg

Mailing Address 597 Woodmere Blvd

City State Zip Code  
Woodmere NY 11598

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

Name of Employer Occupation  
Self Interior Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21703

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda Scheiner	Date of Receipt MM / DD / YYYY 05 / 04 / 2008
	Mailing Address 4525 Henry Hudson Parkway	<b>Transaction ID:</b> SA11AI.21755
	City State Zip Code Riverdale NY 10471	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Schering Plough clinical scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mitchell Schwartz	Date of Receipt MM / DD / YYYY 05 / 07 / 2008
	Mailing Address 46 Larch Hill Road	<b>Transaction ID:</b> SA11AI.21791
	City State Zip Code Lawrence NY 11559	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self Real Estate Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Simeon Schwartz	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 45 Briarwood Lane	<b>Transaction ID:</b> SA11AI.21944
	City State Zip Code Lawrence NY 11559	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation USB AG Banking	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	975.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Harriet Seif

Mailing Address 251 E. Linden Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ .00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.22072

Amount of Each Receipt this Period  
 500.00

check to Stevens for Senate Cmte

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Barbara Shapiro

Mailing Address 746 Washburn St

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation Speech-Learning Therapist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.21894

Amount of Each Receipt this Period  
 275.00

**C.**

Full Name (Last, First, Middle Initial)  
Saadia Shapiro

Mailing Address 267 Maple St

City Englewood State NJ Zip Code 07631

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

Name of Employer Shapiro & Shapiro Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.21943

Amount of Each Receipt this Period  
 550.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **825.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Elliot Shulman	Date of Receipt MM / DD / YYYY 05 / 11 / 2008
	Mailing Address 105 Dana Place	<b>Transaction ID:</b> SA11AI.21842
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Self Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Silverman	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 30 S. Adelaide Ave Apt 4B	<b>Transaction ID:</b> SA11AI.22030
	City State Zip Code Highland Park NJ 08904	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NY Life Occupation Agent	check to Coleman for Senate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
	<b>[MEMO ITEM]</b>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Silverman	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 30 S. Adelaide Ave Apt 4B	<b>Transaction ID:</b> SA11AI.22079
	City State Zip Code Highland Park NJ 08904	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer NY Life Occupation Agent	check to Stevens for Senate Cmte	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00	
	<b>[MEMO ITEM]</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) Joy Sklar		Date of Receipt MM / DD / YYYY 05 / 05 / 2008
Mailing Address 95 Norfolk St		<b>Transaction ID:</b> SA11AI.21691
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer n/a	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

**B.**

Full Name (Last, First, Middle Initial) Janet Slifer		Date of Receipt MM / DD / YYYY 05 / 14 / 2008
Mailing Address 1 River Lane		<b>Transaction ID:</b> SA11AI.21940
City Millburn	State NJ	Zip Code 07041
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Prudential Financial	Occupation Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Howard Slochowsky		Date of Receipt MM / DD / YYYY 05 / 07 / 2008
Mailing Address 48 Bayberry Road		<b>Transaction ID:</b> SA11AI.21780
City Lawrence	State NY	Zip Code 11559
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Karat Platinum	Occupation Jewlery Wholesaler	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Harry Soffer	Date of Receipt MM / DD / YYYY 05 / 12 / 2008
	Mailing Address 43 Snowdrop Drive	<b>Transaction ID:</b> SA11AI.21858
	City State Zip Code New City NY 10956	Amount of Each Receipt this Period 425.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation JL Rodgers Realty real estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Yitzi Solomon	Date of Receipt MM / DD / YYYY 05 / 18 / 2008
	Mailing Address 553 Maitland Avenue	<b>Transaction ID:</b> SA11AI.22009
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 425.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self Financial Planner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alan Spiegel	Date of Receipt MM / DD / YYYY 05 / 07 / 2008
	Mailing Address 281 East Linden Avenue	<b>Transaction ID:</b> SA11AI.21785
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 38 / 88  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
Etti Stavky  
Mailing Address 532 Churchill Road  
City Teaneck State NJ Zip Code 07666  
FEC ID number of contributing federal political committee. **C**  
Name of Employer n/a Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 05 / 12 / 2008  
Transaction ID: SA11AI.21884  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Trudy Stern  
Mailing Address 480 ocean ave  
City Lawrence State NY Zip Code 11559  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 525.00  
Date of Receipt 05 / 11 / 2008  
Transaction ID: SA11AI.21849  
Amount of Each Receipt this Period 125.00

**C.** Full Name (Last, First, Middle Initial)  
Trudy Stern  
Mailing Address 480 ocean ave  
City Lawrence State NY Zip Code 11559  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt 05 / 15 / 2008  
Transaction ID: SA11AI.21736  
Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 550.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 88

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Warren stieglitz

Mailing Address 46 Hidden Ledge Rd.

City State Zip Code  
Englewood NJ 07631

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

Name of Employer Occupation  
none Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.21735

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Roy Tanzman

Mailing Address 4 Talia Rd.

City State Zip Code  
Kendall Park NJ 08824

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

Name of Employer Occupation  
Wilentz Goldman and Spitzer Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ .00

Date of Receipt

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

Transaction ID: SA11AI.22021

Amount of Each Receipt this Period

100.00

Check to Landrieu for Senate

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Robert Van Grover

Mailing Address 22 Maltbie Ave.

City State Zip Code  
Ridgewood NJ 07450

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

Name of Employer Occupation  
Seward & Kissel LLP Attorney

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.21958

Amount of Each Receipt this Period

500.00

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

1500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial)  
Hillel Weinberger

Mailing Address 591 Winthrop Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
HillMark Capital Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2008

**Transaction ID:** SA11AI.21773

Amount of Each Receipt this Period  
1800.00

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code  
Edison NJ 08820

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

Name of Employer Occupation  
n/a Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

**Transaction ID:** SA11AI.21682

Amount of Each Receipt this Period  
100.00

In-kind - fax send

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Weinstein

Mailing Address 11 Anthony Ave.

City State Zip Code  
Edison NJ 08820

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

Name of Employer Occupation  
n/a Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.18

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2008

**Transaction ID:** SA11AI.22153

Amount of Each Receipt this Period  
250.18

In-kind - breakfast 2 buses to DC

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2150.18**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 88  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 343 Starling Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer self Occupation trader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 12 / 2008  
**Transaction ID: SA11AI.21963**  
Amount of Each Receipt this Period 300.00

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

Mailing Address 56 N 6th Avenue

City Highland Park State NJ Zip Code 08904

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

Name of Employer Bayer Pharmaceuticals Occupation Director of Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2008  
**Transaction ID: SA11AI.21746**  
Amount of Each Receipt this Period 300.00

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

Mailing Address 1656 North Jerusalem Road

City North Merrick State NY Zip Code 11566

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

Name of Employer East Meadow Jewish Center Occupation Rabbi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt 05 / 12 / 2008  
**Transaction ID: SA11AI.21709**  
Amount of Each Receipt this Period 175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 775.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 88  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 276 Warwick Ave.

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Self Occupation Dentist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 12 / 2008  
Transaction ID: SA11AI.21864  
Amount of Each Receipt this Period: 300.00

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

Mailing Address 23 Cleveland Terrace

City State Zip Code  
West Orange NJ 07052

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

Name of Employer West Orange Board of Ed Occupation Substitute Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 08 / 2008  
Transaction ID: SA11AI.21811  
Amount of Each Receipt this Period: 350.00

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

Mailing Address 624 Queen Anne Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Random House Occupation Systems & Operations Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 07 / 2008  
Transaction ID: SA11AI.21789  
Amount of Each Receipt this Period: 350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**TOTAL** This Period (last page this line number only) ..... ► 36420.35

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 88  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.**

Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt MM / DD / YYYY 05 / 08 / 2008
Mailing Address 1445 Valley Rd		<b>Transaction ID:</b> SA17.22102
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 587.56
Name of Employer	Occupation	interest - cd ...691
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6715.37	

**B.**

Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt MM / DD / YYYY 05 / 17 / 2008
Mailing Address 1445 Valley Rd		<b>Transaction ID:</b> SA17.22104
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 659.98
Name of Employer	Occupation	interest - cd ...019
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7375.35	

**C.**

Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address 1445 Valley Rd		<b>Transaction ID:</b> SA17.21677
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.03
Name of Employer	Occupation	interest income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7405.38	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1277.57</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 44 / 88	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) NORPAC
---------------------------------------

<b>A.</b>	Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt
	Mailing Address 1445 Valley Rd		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Wayne	NJ	07470
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="7572.01"/>	Transaction ID: SA17.21678 Amount of Each Receipt this Period <input type="text" value="166.63"/> interest income sweep account

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="166.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1444.20"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
NORPAC

A.	Full Name (Last, First, Middle Initial) 5 Towns Jewish Times	Transaction ID: SB21B.21655 Date of Disbursement
	Mailing Address PO Box 690	<input type="text" value="05"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Lawrence State NY Zip Code 11559	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad for mission recruitment	<input type="text" value="400.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) 5 Towns Jewish Times	Transaction ID: SB21B.21668 Date of Disbursement
	Mailing Address PO Box 690	<input type="text" value="05"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Lawrence State NY Zip Code 11559	Amount of Each Disbursement this Period
	Purpose of Disbursement Mission Ad	<input type="text" value="400.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Advantage Promotions	Transaction ID: SB21B.22151 Date of Disbursement
	Mailing Address 125 Matthews Drive	<input type="text" value="05"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Bedminster State NJ Zip Code 07921	Amount of Each Disbursement this Period
	Purpose of Disbursement NORPAC pins - pd by Barbara Bortniker	<input type="text" value="667.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="800.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) All Stage & Sound Inc	Transaction ID: SB21B.21662
	Mailing Address 21500 Laytonsville Road	Date of Disbursement 05 / 29 / 2008
	City Laytonsville State MD Zip Code 20882	Amount of Each Disbursement this Period 2488.56
	Purpose of Disbursement Sound and podium rental for Mission	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Atmosphere Inc	Transaction ID: SB21B.21648
	Mailing Address 2715 Pittman Drive	Date of Disbursement 05 / 13 / 2008
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period 1530.00
	Purpose of Disbursement rental of lighting for Mission	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Barbara Bortniker	Transaction ID: SB21B.22150
	Mailing Address 4 Kinzel Lane	Date of Disbursement 05 / 21 / 2008
	City West Orange State NJ Zip Code 07052	Amount of Each Disbursement this Period 845.17
	Purpose of Disbursement In-kind - Mission exp see memo text	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4863.73</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 88

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Capital Party Rentals Mailing Address 12106 Wilkins Avenue City Rockville State MD Zip Code 20852 Purpose of Disbursement Mission tables and chairs payment 2 Candidate Name	Transaction ID: SB21B.21642 Date of Disbursement 05 / 08 / 2008
	Amount of Each Disbursement this Period 1844.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Capitol Advantage Publishing Mailing Address PO Box 2018 City Merrifield State VA Zip Code 22116 Purpose of Disbursement 125 congressional handbooks Candidate Name	Transaction ID: SB21B.21632 Date of Disbursement 05 / 01 / 2008
	Amount of Each Disbursement this Period 1881.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Capitol Advantage Publishing Mailing Address PO Box 2018 City Merrifield State VA Zip Code 22116 Purpose of Disbursement Congressional handbooks Candidate Name	Transaction ID: SB21B.21667 Date of Disbursement 05 / 30 / 2008
	Amount of Each Disbursement this Period 140.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3866.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Coach USA	Transaction ID: SB21B.21653 Date of Disbursement MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 160 South Rt 17 North	Amount of Each Disbursement this Period 2559.50
	City Paramus State NJ Zip Code 07652	
	Purpose of Disbursement 2 charter buses to washington	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Constant Contact	Transaction ID: SB21B.22157 Date of Disbursement MM / DD / YYYY 05 / 19 / 2008
	Mailing Address 1601 Trapelo Rd Suite 329	Amount of Each Disbursement this Period 63.75
	City Waltham State MA Zip Code 02451	
	Purpose of Disbursement email delivery service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Noam Davidovics	Transaction ID: SB21B.22139 Date of Disbursement MM / DD / YYYY 05 / 12 / 2008
	Mailing Address 3308 W Strathmore Ave	Amount of Each Disbursement this Period 357.76
	City Baltimore State MD Zip Code 21215	
	Purpose of Disbursement Payroll: IT duties	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2559.50
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Joel Davidson	Transaction ID: SB21B.22117
	Mailing Address 25 Ellen Drive	Date of Disbursement MM / DD / YYYY 05 / 01 / 2008
	City Rockaway State NJ Zip Code 07866	Amount of Each Disbursement this Period 1339.96
	Purpose of Disbursement Payroll - Treasurer - Disp # 21630	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Joel Davidson	Transaction ID: SB21B.21640
	Mailing Address 25 Ellen Drive	Date of Disbursement MM / DD / YYYY 05 / 05 / 2008
	City Rockaway State NJ Zip Code 07866	Amount of Each Disbursement this Period 191.60
	Purpose of Disbursement travel reimbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Joel Davidson	Transaction ID: SB21B.22136
	Mailing Address 25 Ellen Drive	Date of Disbursement MM / DD / YYYY 05 / 15 / 2008
	City Rockaway State NJ Zip Code 07866	Amount of Each Disbursement this Period 1339.96
	Purpose of Disbursement Payroll - Treasurer - Disp # 21638	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	191.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Joel Davidson	Transaction ID: SB21B.22143 Date of Disbursement 05 / 29 / 2008
	Mailing Address 25 Ellen Drive	
	City Rockaway State NJ Zip Code 07866	Amount of Each Disbursement this Period 1339.96
	Purpose of Disbursement Payroll - Treasurer - Disp # 21658 Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Rachel Feldman	Transaction ID: SB21B.22132 Date of Disbursement 05 / 15 / 2008
	Mailing Address 173 Baker Avenue	
	City Bergenfield State NJ Zip Code 07621	Amount of Each Disbursement this Period 1904.27
	Purpose of Disbursement Payroll: Memb Dir duties Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Rachel Feldman	Transaction ID: SB21B.22146 Date of Disbursement 05 / 29 / 2008
	Mailing Address 173 Baker Avenue	
	City Bergenfield State NJ Zip Code 07621	Amount of Each Disbursement this Period 1636.93
	Purpose of Disbursement Payroll: Memb Dir duties Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) J2 Global Communications</p> <p>Mailing Address 6922 Hollywood Boulevard 5th Floor</p> <p>City Hollywood State CA Zip Code 90028</p> <p>Purpose of Disbursement in-kind fax service(thru Jeff Weinstein) Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21684 <b>Date of Disbursement</b> 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jewish Voice</p> <p>Mailing Address Dana Place</p> <p>City Englewood State NJ Zip Code 07631</p> <p>Purpose of Disbursement Ad for Mission Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21666 <b>Date of Disbursement</b> 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 240.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kosher Mart</p> <p>Mailing Address 4860 Boiling Brook Parkway</p> <p>City Rockville State MD Zip Code 20852</p> <p>Purpose of Disbursement lunch/dinner for 900 on Mission Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21661 <b>Date of Disbursement</b> 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 24430.92</p>

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

24670.92

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Long Island Jewish World	Transaction ID: SB21B.21664 Date of Disbursement
	Mailing Address 1525 Central Ave	<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Far Rockaway State NY Zip Code 11691	Amount of Each Disbursement this Period
	Purpose of Disbursement Ad for mission recruitment	<input type="text" value="800.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Maadan	Transaction ID: SB21B.21669 Date of Disbursement
	Mailing Address 446 Cedar Lane	<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Teaneck State NJ Zip Code 07666	Amount of Each Disbursement this Period
	Purpose of Disbursement breakfast for 500 on washington mission	<input type="text" value="3744.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Metro Forms, Inc	Transaction ID: SB21B.22164 Date of Disbursement
	Mailing Address 74 Davis Avenue	<input type="text" value="05"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Rye State NY Zip Code 10580	Amount of Each Disbursement this Period
	Purpose of Disbursement Mission nametags - purchased 4/29/08	<input type="text" value="405.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4544.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Monsey Tours</p> <p>Mailing Address 870 Dean St</p> <p>City Brooklyn State NY Zip Code 11238</p> <p>Purpose of Disbursement 20 charter buses to washington</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21651</p> <p>Date of Disbursement 05 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 36100.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) NJ Jewish Media Group</p> <p>Mailing Address 1086 Teaneck Rd.</p> <p>City Teaneck State NJ Zip Code 07666</p> <p>Purpose of Disbursement Ad for mission recruitment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21654</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 471.90</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NJ Jewish News</p> <p>Mailing Address 901 Route 10</p> <p>City Whippany State NJ Zip Code 07981</p> <p>Purpose of Disbursement ads for mission recruitment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21656</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 930.00</p>

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

37501.90

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Leonor Nunez	Transaction ID: SB21B.22125 Date of Disbursement 05 / 01 / 2008
	Mailing Address 526 Longview Ave	Amount of Each Disbursement this Period 287.76
	City Cliffsides Park State NJ Zip Code 07010	
	Purpose of Disbursement Payroll: Bookkeeper duties Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Leonor Nunez	Transaction ID: SB21B.22141 Date of Disbursement 05 / 29 / 2008
	Mailing Address 526 Longview Ave	Amount of Each Disbursement this Period 233.80
	City Cliffsides Park State NJ Zip Code 07010	
	Purpose of Disbursement Payroll: Bookkeeper duties Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Oxford Health Plans NJ, Inc.	Transaction ID: SB21B.21650 Date of Disbursement 05 / 13 / 2008
	Mailing Address PO Box 1697	Amount of Each Disbursement this Period 485.51
	City Newark State NJ Zip Code 07101	
	Purpose of Disbursement Davidson health insurance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	485.51
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Nunez payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21629</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 287.76</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Davidson payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21630</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1339.96</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Rosenberg payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21631</p> <p>Date of Disbursement 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 220.04</p>

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

1847.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21633
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 02 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1100.19
	Purpose of Disbursement payroll taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21636
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 12 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 200.15
	Purpose of Disbursement payroll service charge	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21644
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 12 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 357.76
	Purpose of Disbursement Davidovics payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1658.10
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21645
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 12 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1052.10
	Purpose of Disbursement Wolkowitz payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21637
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 15 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1904.27
	Purpose of Disbursement Feldman payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21638
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 15 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1339.96
	Purpose of Disbursement Davidson payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4296.33</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave. City Piscataway State NJ Zip Code 08854 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.21639 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1173.72

<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave. City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Nunez payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.21657 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 233.80

<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave. City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Davidson payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.21658 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1339.96

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2747.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 59 / 88

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21659
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 29 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 832.55
	Purpose of Disbursement Rosenberg payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21660
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 29 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1636.93
	Purpose of Disbursement Feldman payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.21670
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 29 / 2008
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 2552.95
	Purpose of Disbursement payroll taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5022.43</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) paypal	Transaction ID: SB21B.21680 Date of Disbursement 05 / 31 / 2008
	Mailing Address PO Box 45950	Amount of Each Disbursement this Period 1074.94
	City Omaha State NE Zip Code 68145	
	Purpose of Disbursement Paypal processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex	Transaction ID: SB21B.22357 Date of Disbursement 05 / 29 / 2008
	Mailing Address 55 Smith St	Amount of Each Disbursement this Period 41.00
	City Englewood State NJ Zip Code 07631	
	Purpose of Disbursement postage purchased 4/10/08	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex	Transaction ID: SB21B.22358 Date of Disbursement 05 / 29 / 2008
	Mailing Address 55 Smith St	Amount of Each Disbursement this Period 13.20
	City Englewood State NJ Zip Code 07631	
	Purpose of Disbursement postage purchased 4/18/08	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1074.94
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex Mailing Address 55 Smith St City Englewood State NJ Zip Code 07631 Purpose of Disbursement postage purchased 4/29/08 Candidate Name	Transaction ID: SB21B.22359 Date of Disbursement 05 / 29 / 2008 Amount of Each Disbursement this Period 1.48

[MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Rockaway BP Mailing Address 51 Hibernia Ave City Rockaway State NJ Zip Code 07866 Purpose of Disbursement gas purchased 4/3/08 Candidate Name	Transaction ID: SB21B.22393 Date of Disbursement 05 / 05 / 2008 Amount of Each Disbursement this Period 29.03

[MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) Rockaway BP Mailing Address 51 Hibernia Ave City Rockaway State NJ Zip Code 07866 Purpose of Disbursement gas purchased 4/3/08 Candidate Name	Transaction ID: SB21B.22394 Date of Disbursement 05 / 05 / 2008 Amount of Each Disbursement this Period 10.07

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Rockaway BP</p> <p>Mailing Address 51 Hibernia Ave</p> <p>City Rockaway State NJ Zip Code 07866</p> <p>Purpose of Disbursement gas purchased 4/28/08</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.22395</p> <p><b>Date of Disbursement</b> 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 27.49</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jonathan Rosenberg</p> <p>Mailing Address 221 Addison Place</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Payroll - Office help. Disp # 21631</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.22130</p> <p><b>Date of Disbursement</b> 05 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 220.04</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jonathan Rosenberg</p> <p>Mailing Address 221 Addison Place</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Payroll: office help. Disp # 21659</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.22145</p> <p><b>Date of Disbursement</b> 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 832.55</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Staples Direct	Transaction ID: SB21B.22162 Date of Disbursement 05 / 29 / 2008
	Mailing Address 500 Staples Drive	Amount of Each Disbursement this Period 550.07
	City Framingham State MA Zip Code 01702	
	Purpose of Disbursement office supplies purchased 4/14/08	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Triangle Exxon	Transaction ID: SB21B.22396 Date of Disbursement 05 / 05 / 2008
	Mailing Address 2151 Lemoine Ave	Amount of Each Disbursement this Period 31.00
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement gas purchaesd 4/9/08	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Triangle Exxon	Transaction ID: SB21B.22397 Date of Disbursement 05 / 05 / 2008
	Mailing Address 2151 Lemoine Ave	Amount of Each Disbursement this Period 29.01
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement gas purchased 4/15/08	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) Triangle Exxon	Transaction ID: SB21B.22398
	Mailing Address 2151 Lemoine Ave	Date of Disbursement 05 / 05 / 2008
	City Fort Lee State NJ Zip Code 07024	Amount of Each Disbursement this Period 28.07
	Purpose of Disbursement gas purchased 4/18/08	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Triangle Exxon	Transaction ID: SB21B.22399
	Mailing Address 2151 Lemoine Ave	Date of Disbursement 05 / 05 / 2008
	City Fort Lee State NJ Zip Code 07024	Amount of Each Disbursement this Period 36.93
	Purpose of Disbursement gas purchased 4/24/08	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.21635
	Mailing Address 1445 Valley Rd	Date of Disbursement 05 / 05 / 2008
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period 130.07
	Purpose of Disbursement 500 checks	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	130.07
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement Analysis charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21646</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 34.05</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement Chouake cred card pay - see memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.22015</p> <p>Date of Disbursement 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 63.75</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement Davidson cred card - see memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.22016</p> <p>Date of Disbursement 05 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1093.25</p>

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

1191.05

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21679</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon wireless</p> <p>Mailing Address PO Box 17120</p> <p>City Tucson State AZ Zip Code 85731</p> <p>Purpose of Disbursement Phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21665</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="491.51"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jeffrey Weinstein</p> <p>Mailing Address 11 Anthony Ave.</p> <p>City Edison State NJ Zip Code 08820</p> <p>Purpose of Disbursement In-kind - fax send</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.21683</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="601.51"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 67 / 88

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

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

Mailing Address 11 Anthony Ave.

City Edison State NJ Zip Code 08820

Purpose of Disbursement  
In-kind - breakfast 2 buses to DC

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.22154  
Date of Disbursement  
05 / 21 / 2008

Amount of Each Disbursement this Period  
250.18

Category/Type

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

Mailing Address 16 Berry Drive

City Wayne State NJ Zip Code 07470

Purpose of Disbursement  
Payroll: Office Support. Disp # 21645

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21B.22140  
Date of Disbursement  
05 / 12 / 2008

Amount of Each Disbursement this Period  
1052.10

[MEMO ITEM]

Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	250.18
<b>TOTAL</b> This Period (last page this line number only) .....	▶	98303.13

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08 <hr/> Mailing Address 570 ASBURY STREET SUITE 201A <hr/> City ST PAUL State MN Zip Code 55104 <hr/> Purpose of Disbursement <hr/> Candidate Name NORM COLEMAN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.21671 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	[MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08 <hr/> Mailing Address 570 ASBURY STREET SUITE 201A <hr/> City ST PAUL State MN Zip Code 55104 <hr/> Purpose of Disbursement check from Eric Silverman <hr/> Candidate Name NORM COLEMAN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22034 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00
	011 Category/ Type
	[MEMO ITEM]
<b>C.</b> Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08 <hr/> Mailing Address 570 ASBURY STREET SUITE 201A <hr/> City ST PAUL State MN Zip Code 55104 <hr/> Purpose of Disbursement credit card from Michael Ehrenich <hr/> Candidate Name NORM COLEMAN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22032 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	[MEMO ITEM]

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

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08	Transaction ID: SB23.22033 Date of Disbursement 05 / 12 / 2008
	Mailing Address 570 ASBURY STREET SUITE 201A	Amount of Each Disbursement this Period 150.00
	City ST PAUL State MN Zip Code 55104	
	Purpose of Disbursement credit card from Ephraim Isaac Candidate Name NORM COLEMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC	Transaction ID: SB23.22024 Date of Disbursement 05 / 23 / 2008
	Mailing Address 650 POYDRAS ST SUITE 1434	Amount of Each Disbursement this Period 1000.00
	City NEW ORLEANS State LA Zip Code 70130	
	Purpose of Disbursement check from Joseph Paradis Candidate Name MARY L LANDRIEU Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC	Transaction ID: SB23.22025 Date of Disbursement 05 / 23 / 2008
	Mailing Address 650 POYDRAS ST SUITE 1434	Amount of Each Disbursement this Period 100.00
	City NEW ORLEANS State LA Zip Code 70130	
	Purpose of Disbursement Check from Roy Tanzman Candidate Name MARY L LANDRIEU Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
John McCain 2008 General Election Compliance Fund Inc

Mailing Address PO Box 16118

City Arlington State VA Zip Code 22215

Purpose of Disbursement  
check from Abraham J. Kramer

Candidate Name  
JOHN S MCCAIN

Office Sought:  House  
 Senate  
 President  
State: District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.22109  
Date of Disbursement

05 / 14 / 2008

Amount of Each Disbursement this Period

700.00

[MEMO ITEM]

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

Mailing Address 303 GEORGE STREET 6TH FLOOR

City NEW BRUNSWICK State NJ Zip Code 08901

Purpose of Disbursement

Candidate Name  
FRANK R LAUTENBERG

Office Sought:  House  
 Senate  
 President  
State: NJ District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.21676  
Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

2510.00

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

Mailing Address 303 GEORGE STREET 6TH FLOOR

City NEW BRUNSWICK State NJ Zip Code 08901

Purpose of Disbursement  
credit card from Mort Fridman

Candidate Name  
FRANK R LAUTENBERG

Office Sought:  House  
 Senate  
 President  
State: NJ District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.22056  
Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

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

2510.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE  Mailing Address 303 GEORGE STREET 6TH FLOOR  City NEW BRUNSWICK State NJ Zip Code 08901 Purpose of Disbursement check from Sarah Goodman Candidate Name FRANK R LAUTENBERG Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22051 Date of Disbursement 05 / 30 / 2008  Amount of Each Disbursement this Period 1700.00  [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE  Mailing Address 303 GEORGE STREET 6TH FLOOR  City NEW BRUNSWICK State NJ Zip Code 08901 Purpose of Disbursement credit card from Robert Goodman Candidate Name FRANK R LAUTENBERG Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22052 Date of Disbursement 05 / 30 / 2008  Amount of Each Disbursement this Period 1300.00  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE  Mailing Address 303 GEORGE STREET 6TH FLOOR  City NEW BRUNSWICK State NJ Zip Code 08901 Purpose of Disbursement check from Howard Baruch Candidate Name FRANK R LAUTENBERG Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22053 Date of Disbursement 05 / 30 / 2008  Amount of Each Disbursement this Period 1000.00  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement check from Arline Duker</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22054 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement credit card from Esther Chouake</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22055 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 950.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement credit card from Esther Chouake</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22057 <b>Date of Disbursement</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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



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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement check from Anne Gontownik</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22058 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement check from Janet Hoffman</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22059 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address 303 GEORGE STREET 6TH FLOOR</p> <p>City NEW BRUNSWICK State NJ Zip Code 08901</p> <p>Purpose of Disbursement check from Stephen Paul</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.22060 <b>Date of Disbursement:</b> 05 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b>	Full Name (Last, First, Middle Initial) MCCAIN VICTORY 2008 <hr/> Mailing Address 228 S WASHINGTON ST STE 115 <hr/> City ALEXANDRIA State VA Zip Code 22314 <hr/> Purpose of Disbursement check from Abraham J. Kramer Candidate Name JOHN S MCCAIN <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.22111 Date of Disbursement 05 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 2300.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08 <hr/> Mailing Address PO BOX 1496 <hr/> City LOUISVILLE State KY Zip Code 40201 <hr/> Purpose of Disbursement check from Jerry Gontownik Candidate Name MITCH MCCONNELL <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 00	Transaction ID: SB23.22039 Date of Disbursement 05 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 1600.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE <hr/> Mailing Address PO BOX 100879 <hr/> City ANCHORAGE State AK Zip Code 99510 <hr/> Purpose of Disbursement credit card from Reuven Escott Candidate Name THEODORE F (TED) STEVENS <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AK District: 00	Transaction ID: SB23.22092 Date of Disbursement 05 / 05 / 2008 <hr/> Amount of Each Disbursement this Period 500.00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	0.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 88

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement credit card from Mort Fridman Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22093 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement credit card from Alan Berger Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22096 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 [MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement check from Elaine Jacobs Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22098 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement check from Chaim Rosen Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22099 Date of Disbursement 05 / 05 / 2008
	Amount of Each Disbursement this Period 200.00 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement check from Eric Silverman Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22100 Date of Disbursement 05 / 05 / 2008
	Amount of Each Disbursement this Period 100.00 [MEMO ITEM]

<b>C.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE Mailing Address PO BOX 100879 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement credit card from Kevin Lemmer Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22094 Date of Disbursement 05 / 06 / 2008
	Amount of Each Disbursement this Period 500.00 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE <hr/> Mailing Address PO BOX 100879 <hr/> City ANCHORAGE State AK Zip Code 99510 <hr/> Purpose of Disbursement credit card from Ben Chouake Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22084 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 2300.00 [MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE <hr/> Mailing Address PO BOX 100879 <hr/> City ANCHORAGE State AK Zip Code 99510 <hr/> Purpose of Disbursement credit card from Jack Halpern Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22086 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]
<b>C.</b> Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE <hr/> Mailing Address PO BOX 100879 <hr/> City ANCHORAGE State AK Zip Code 99510 <hr/> Purpose of Disbursement check from Leon Kozak Candidate Name THEODORE F (TED) STEVENS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.22087 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22089 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card from Robert Goodman	<input type="text" value="1000.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22090 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement check from Randall Krakauer	<input type="text" value="1000.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22097 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement check from Robert M. Gottesman	<input type="text" value="250.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

**A.** Full Name (Last, First, Middle Initial)  
STEVENS FOR SENATE COMMITTEE

Mailing Address PO BOX 100879

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement

Candidate Name  
THEODORE F (TED) STEVENS

Office Sought:  House  Senate  President  
State: AK District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.21672  
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

5000.00

011  
Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
STEVENS FOR SENATE COMMITTEE

Mailing Address PO BOX 100879

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement

Candidate Name  
THEODORE F (TED) STEVENS

Office Sought:  House  Senate  President  
State: AK District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.21675  
Date of Disbursement

05 / 12 / 2008

Amount of Each Disbursement this Period

5000.00

011  
Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
STEVENS FOR SENATE COMMITTEE

Mailing Address PO BOX 100879

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement  
check from Jason Muss

Candidate Name  
THEODORE F (TED) STEVENS

Office Sought:  House  Senate  President  
State: AK District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.22091  
Date of Disbursement

05 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

011  
Category/  
Type

[MEMO ITEM]

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
NORPAC

A.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22095 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card from Harriet Seif	<input type="text" value="500.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22085 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card from Esther Chouake	<input type="text" value="2300.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) STEVENS FOR SENATE COMMITTEE	Transaction ID: SB23.22088 Date of Disbursement
	Mailing Address PO BOX 100879	<input type="text" value="05"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ANCHORAGE State AK Zip Code 99510	Amount of Each Disbursement this Period
	Purpose of Disbursement check from Anne Gontownik	<input type="text" value="1800.00"/>
	Candidate Name THEODORE F (TED) STEVENS	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="17510.00"/>



Form/Schedule: **F3XA**

Transaction ID:

The aggregate year-to-date totals on Schedule A show the total contributions from individuals that were received by the PAC in that year. Earmarked donations for campaigns (NORPAC acting as a conduit) entered as memos are not included in the aggregate totals. Therefore the aggregate year-to-date total may appear incorrect (as it is often less than the total earmark) but it is actually recorded and calculated correctly. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. No mission expenditures on Schedule B, including DC trip venue fees, tables, chairs 1 and 2, Mission nametags, etc are on behalf of specifically identified federal candidates and therefore no additional information needs to be disclosed on Schedule B or E. The NORPAC Annual Mission to Washington DC trip consists of citizen activists meeting with hundreds of members of Congress to discuss legislation. Any public communications including mission ads and congressional handbooks are designed to recruit members to the mission and do not express advocacy or voter driver activity for any Federal candidates. Therefore no additional information needs to be disclosed on Schedule B or E.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.22149**

Bus Parking in DC (\$70), Coffee (\$90), Copies (\$2.97), Water (\$15), NORPAC buttons (\$667.20) - see Advantage Promotions memo

**Image# 28991846509**

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.22153**

Stop / Shop - \$38.78, Dunkin Donuts - \$130, Acme - \$81.40

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22164**

Paid with Valley National Bank credit card on 5/29/2008. Disp #22016

\*\*\*\*\*

**Image# 28991846510**

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22357**

Paid with Valley National Bank credit card on 5/29/2008. Disp #22016

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22358**

Paid with Valley National Bank credit card on 5/29/2008. Disp #22016

\*\*\*\*\*

**Image# 28991846511**

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22359**

Paid with Valley National Bank credit card on 5/29/2008. Disp #22016

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22393**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

\*\*\*\*\*

**Image# 28991846512**

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22394**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22395**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

\*\*\*\*\*

**Image# 28991846513**

Form/Schedule: **SB21B**  
Transaction ID: **SB21B.22162**

Pens, folders and labels for Mission to Washington. Paid with Valley National Bank credit card on 5/29/2008.  
Disp #22016

Form/Schedule: **SB21B**  
Transaction ID: **SB21B.22396**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

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**Image# 28991846514**

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22397**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

Form/Schedule: **SB21B**

Transaction ID: **SB21B.22398**

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

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Image# 28991846515

Form/Schedule: SB21B

Travel expense for Joel Davidson reimbursed on 5/5/08, Disp #21640

Transaction ID: SB21B.22399

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