

# 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  
New Jersey Democratic State Committee

ADDRESS (number and street) 196 West State Street  
 Check if different than previously reported. (ACC)  
Trenton NJ 08608

2. **FEC IDENTIFICATION NUMBER** C00104471  
**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)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 08 01 2006 through 08 31 2006

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 Kiran R. Desai

Signature of Treasurer Electronically Filed by Kiran R. Desai Date 10 20 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
New Jersey Democratic State Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		312387.98
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	427609.41									
(c) Total Receipts (from Line 19) .....	635944.22	1614030.66								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1063553.63	1926418.64								
7. Total Disbursements (from Line 31) .....	205768.64	1068633.65								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	857784.99	857784.99								
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) .....	35036.00									

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  
New Jersey Democratic State Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	6450.00	207850.00
(i) Itemized (use Schedule A) .....	550.00	1560.00
(ii) Unitemized .....	7000.00	209410.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	6500.00	60940.00
(c) Other Political Committees (such as PACs) .....	13500.00	270350.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	575678.60	1047772.19
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	7559.48
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	46765.62	288348.99
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	46765.62	288348.99
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	635944.22	1614030.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	589178.60	1325681.67

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	12768.08	115339.93
(ii) Non-Federal Share.....	44497.46	396490.54
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	57265.54	511830.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
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	12000.00
(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	12000.00
29. Other Disbursements.....	0.00	500.00
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 .....	148503.10	534303.18
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	148503.10	534303.18
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	205768.64	1068633.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	161271.18	672143.11

**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) .....	13500.00	270350.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	12000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13500.00	258350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12768.08	115339.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	7559.48
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12768.08	107780.45

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 81
	<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

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)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Maria Monzon Mailing Address 1 Avenue At Port Imperial 1224 City State Zip Code West New York NJ 07093 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006 <b>Transaction ID:</b> 11ai-000029175 Amount of Each Receipt this Period 500.00
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 ▼ 1500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Tonio Burgos Mailing Address Tonio Burgos & Associates of NJ 206 West Shearwater Court City State Zip Code Jersey City NJ 07305 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2006 <b>Transaction ID:</b> 11ai-000029176 Amount of Each Receipt this Period 5000.00
Name of Employer Tonio Burgos & Associates of NJ LLC Occupation Lobbyist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5275.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Genova Burns & Vernioia Mailing Address 354 Eisenhower Parkway, Suite 2575 Attn: Angelo J Genova, Esq City State Zip Code Livingston NJ 07039 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2006 <b>Transaction ID:</b> 11ai-000029382 Amount of Each Receipt this Period 450.00
Name of Employer  Occupation  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	See Memo Items

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5950.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 81
	<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)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Angelo J. Genova, Esq.		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 9 Frederick Court		<b>Transaction ID:</b> 11 ai-000029383
City State Zip Code Cedar Grove NJ 07009-1340	Amount of Each Receipt this Period 270.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Genova Burns & Vernoia Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	<b>[MEMO ITEM]</b> Partner Share - Genova Bu- rns & Vernoia

Full Name (Last, First, Middle Initial) <b>B.</b> Comprehensive Communications Group		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 58-60 Main Street, Suite 3		<b>Transaction ID:</b> 11 ai-000029472
City State Zip Code Hackensack NJ 07601	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Comprehensive Communications Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	See Memo Items

Full Name (Last, First, Middle Initial) <b>C.</b> Julia Roginsky		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 58 Main Street		<b>Transaction ID:</b> 11 ai-000029473
City State Zip Code Hackensack NJ 07601	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Comprehensive Communications Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	<b>[MEMO ITEM]</b> Partner Share - Comprehen- sive Communications Group

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	6450.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 81
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
New Jersey Democratic State Committee

**A.** Full Name (Last, First, Middle Initial)  
Duane Morris LLP Government Committee Federal Fund

Mailing Address 30 South 17th Street

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00364133

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	7	/	2	0	0	6

**Transaction ID:** 11c-000029139

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Pascrell for Congress, Inc.

Mailing Address P.O. Box 640

City Totowa State NJ Zip Code 07511

FEC ID number of contributing federal political committee. **C** C00313510

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	7	/	2	0	0	6

**Transaction ID:** 11c-000029180

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	6500.00



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 81
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Association of State Democratic Chairs</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 6
Mailing Address Dollars for Democrats 430 South Capitol Street, SE		<b>Transaction ID:</b> 12-01-02876-04802
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 66.31	
FEC ID number of contributing federal political committee. <b>C</b>	Transfer from Affiliate	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 135.27	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Democratic National Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 430 South Capitol Street, SE		<b>Transaction ID:</b> 12-01-02923-04859
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 23345.29	
FEC ID number of contributing federal political committee. <b>C</b>	Joint Fundraising Transfer	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 47636.92	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Democratic National Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 430 South Capitol Street, SE		<b>Transaction ID:</b> 12-01-02924-04860
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 2267.00	
FEC ID number of contributing federal political committee. <b>C</b>	Transfer from Affiliate	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 24291.63	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	25678.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 81
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

**A.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue, NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	7	/	2	0	0	6

**Transaction ID:** 12-16-04293-04396

Amount of Each Receipt this Period  
550000.00

Transfer from Affiliate

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	575678.60

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Andre M Richardson</b>		<b>Transaction ID:</b> 30b-16-04289-04391 Date of Disbursement MM / DD / YYYY 08 / 02 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period -250.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Health Care Stipend - Stop Payment 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Andre M Richardson</b>		<b>Transaction ID:</b> 30b-16-04290-04392 Date of Disbursement MM / DD / YYYY 08 / 02 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 220.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Health Care Stipend (Reissued) 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. ADP Payroll Services</b>		<b>Transaction ID:</b> 30b-01-02985-04930 Date of Disbursement MM / DD / YYYY 08 / 04 / 2006
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 90.92
City Fort Washington State NJ Zip Code 19034	Purpose of Disbursement Payroll Processing Fees 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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	60.92
<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 12 / 81

<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Paula A. Levine</b>		<b>Transaction ID:</b> 30b-16-04291-04393 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 525 Park Avenue, #3B		Amount of Each Disbursement this Period 2475.00
City New York State NY Zip Code 10021	Purpose of Disbursement Fundraising Consulting Services 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Paula A. Levine</b>		<b>Transaction ID:</b> 30b-16-04291-04394 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address 525 Park Avenue, #3B		Amount of Each Disbursement this Period 6750.00
City New York State NY Zip Code 10021	Purpose of Disbursement Fundraising Consulting Services 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Labels &amp; Lists</b>		<b>Transaction ID:</b> 30b-16-04292-04395 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 6
Mailing Address 2500 116th Avenue NE		Amount of Each Disbursement this Period 32674.42
City Bellevue State WA Zip Code 98004	Purpose of Disbursement Voter File Services 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) ▼	Category/ Type

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

**41899.42**

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Gerald Balmir</b>		<b>Transaction ID:</b> 30b-01-02881-04807 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 2904.60
City State Zip Code Trenton NJ 08618	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dale Wolfert</b>		<b>Transaction ID:</b> 30b-01-02882-04808 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 59 Bosko Drive		Amount of Each Disbursement this Period 1628.96
City State Zip Code East Brunswick NJ 08816	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Elizabeth E. Berry</b>		<b>Transaction ID:</b> 30b-01-02883-04809 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 100 Robbinsville - Allentown Road		Amount of Each Disbursement this Period 1294.58
City State Zip Code Robbinsville NJ 08691	Purpose of Disbursement Salary 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) ..... ▶	<b>5828.14</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Daniel C. Dollbaum</b> Full Name (Last, First, Middle Initial) Mailing Address 6 Butler Place City Kearny State NJ Zip Code 07032 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02884-04810</b> Date of Disbursement 08 / 15 / 2006 Amount of Each Disbursement this Period 2260.91 Category/Type
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<b>B. Roberto C Frugone</b> Full Name (Last, First, Middle Initial) Mailing Address 184 Peer Place City Denville State NJ Zip Code 07834 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02885-04811</b> Date of Disbursement 08 / 15 / 2006 Amount of Each Disbursement this Period 1577.42 Category/Type
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<b>C. Diane Legreide</b> Full Name (Last, First, Middle Initial) Mailing Address 68 Brant Drive City Brick State NJ Zip Code 08724 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02886-04812</b> Date of Disbursement 08 / 15 / 2006 Amount of Each Disbursement this Period 1742.86 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5581.19</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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Richard P McGrath</b>		<b>Transaction ID:</b> 30b-01-02887-04813 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 100 Hiram Square		Amount of Each Disbursement this Period 3018.00
City New Brunswick State NJ Zip Code 08901	Purpose of Disbursement Salary 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ray Alcantara</b>		<b>Transaction ID:</b> 30b-01-02888-04814 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 52 Wood Lake Drive		Amount of Each Disbursement this Period 1967.51
City Piscataway State NJ Zip Code 08854	Purpose of Disbursement Salary 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Andre M Richardson</b>		<b>Transaction ID:</b> 30b-01-02889-04815 Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 2370.71
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Salary 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) ..... ▶	7356.22
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. United States Federal Government</b>		<b>Transaction ID:</b> 30b-01-02890-04816 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 8379.85
City Washington State DC Zip Code 20001	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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. State of New Jersey</b>		<b>Transaction ID:</b> 30b-01-02891-04817 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address Department of Treasury		Amount of Each Disbursement this Period 1468.25
City Trenton State NJ Zip Code 08608	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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. United States Federal Government</b>		<b>Transaction ID:</b> 30b-01-02900-04826 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 1397.30
City Washington State DC Zip Code 20001	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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11245.40
<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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. State of New Jersey</b>		<b>Transaction ID:</b> 30b-01-02901-04827
Mailing Address Department of Treasury		Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement Payroll Taxes	Category/ Type	Amount of Each Disbursement this Period 175.08
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:		

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Services</b>		<b>Transaction ID:</b> 30b-01-02986-04931
Mailing Address 1125 Virginia Drive		Date of Disbursement MM / DD / YYYY 08 / 18 / 2006
City Fort Washington	State NJ	Zip Code 19034
Purpose of Disbursement Payroll Processing Fees	Category/ Type	Amount of Each Disbursement this Period 85.39
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:		

Full Name (Last, First, Middle Initial) <b>C. Aetna US Health Care</b>		<b>Transaction ID:</b> 30b-01-02907-04834
Mailing Address PO Box 7247-0221		Date of Disbursement MM / DD / YYYY 08 / 22 / 2006
City Philadelphia	State PA	Zip Code 19170-0221
Purpose of Disbursement Insurance	Category/ Type	Amount of Each Disbursement this Period 2208.80
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) .....	<b>2469.27</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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. ADP Payroll Services</b>		<b>Transaction ID:</b> 30b-01-02987-04932
Mailing Address 1125 Virginia Drive		Date of Disbursement 08 / 25 / 2006
City Fort Washington	State NJ	Zip Code 19034
Purpose of Disbursement Payroll Processing Fees		Amount of Each Disbursement this Period 89.29
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Christine Winter</b>		<b>Transaction ID:</b> 30b-16-04318-04421
Mailing Address 165 Howard Avenue		Date of Disbursement 08 / 25 / 2006
City Rochelle Park	State NJ	Zip Code 07662
Purpose of Disbursement Field Consulting Services		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Kaplan</b>		<b>Transaction ID:</b> 30b-16-04319-04422
Mailing Address 177 Phelps Avenue		Date of Disbursement 08 / 25 / 2006
City Cresskill	State NJ	Zip Code 07626
Purpose of Disbursement Field Consulting Services		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1089.29</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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Michael Monaghan</b> Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> 30b-16-04321-04424 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 25 / 2006
Mailing Address 50 Main Street P.O. Box 632		Amount of Each Disbursement this Period 3000.00
City Hackensack State NJ Zip Code 07062	Purpose of Disbursement Office Space - Rent 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) ▼	Category/Type

<b>B. Diane Legreide</b> Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> 30b-01-02929-04865 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 30 / 2006
Mailing Address 68 Brant Drive		Amount of Each Disbursement this Period 1763.22
City Brick State NJ Zip Code 08724	Purpose of Disbursement Salary 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) ▼	Category/Type

<b>C. Gerald Balmir</b> Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> 30b-01-02930-04866 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 30 / 2006
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 2904.60
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Salary 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) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7667.82
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Ryan Carbain</b> Full Name (Last, First, Middle Initial) Mailing Address 325 Hudson Drive City Brick State NJ Zip Code 08028 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02931-04867</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 718.28 Category/Type
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<b>B. Keith C Carbone</b> Full Name (Last, First, Middle Initial) Mailing Address 332 Ryeside Avenue City New Milford State NJ Zip Code 07646 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02932-04868</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 1149.08 Category/Type
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<b>C. May Chiang</b> Full Name (Last, First, Middle Initial) Mailing Address 34 West 94th Street Apartment 4B City New York State NY Zip Code 10025 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02933-04869</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 782.45 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2649.81</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Victor Cirilo</b> Full Name (Last, First, Middle Initial) Mailing Address 7 Woodhull Avenue City West Orange State NJ Zip Code 07052 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02934-04870</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 1506.31 Category/Type
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<b>B. Laurie K DeMarco</b> Full Name (Last, First, Middle Initial) Mailing Address 3501 Balmoral Court City Freehold State NJ Zip Code 07728 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02935-04871</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 739.75 Category/Type
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<b>C. Hans P Goff</b> Full Name (Last, First, Middle Initial) Mailing Address 5 Cadawalder Drive City Trenton State NJ Zip Code 08618 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02936-04872</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 1170.54 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3416.60</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Adam P Heiser</b>		<b>Transaction ID: 30b-01-02937-04873</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 173 Mountain Avenue		Amount of Each Disbursement this Period 718.28	
City State Zip Code Hawthorne NJ 07506	Purpose of Disbursement Salary 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Peter Joseph</b>		<b>Transaction ID: 30b-01-02938-04874</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 110 Gloucester Drive		Amount of Each Disbursement this Period 854.72	
City State Zip Code Lawnside NJ 08045	Purpose of Disbursement Salary 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ace F. Laluces</b>		<b>Transaction ID: 30b-01-02939-04875</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 477 Clark Place		Amount of Each Disbursement this Period 761.20	
City State Zip Code Union NJ 07083	Purpose of Disbursement Salary 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) ..... ▶	<b>2334.20</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Michael Lang</b>		<b>Transaction ID:</b> 30b-01-02940-04876 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 27 Hawthorne Road		Amount of Each Disbursement this Period 854.72
City Sicklerville State NJ Zip Code 08081	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lester S Lewis-Powder</b>		<b>Transaction ID:</b> 30b-01-02941-04877 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 22 Brookwood Drive		Amount of Each Disbursement this Period 1289.90
City Maplewood State NJ Zip Code 07040	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ayinde M Martin</b>		<b>Transaction ID:</b> 30b-01-02942-04878 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 602 East 85th Street		Amount of Each Disbursement this Period 1012.63
City Brooklyn State NY Zip Code 11236	Purpose of Disbursement Salary 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) ..... ▶	3157.25
<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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Stephon Mickler</b> Full Name (Last, First, Middle Initial) Mailing Address 506 Leon Drive City Anderson State SC Zip Code 29621 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02943-04879</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 1192.00 Category/Type
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<b>B. Adam Neary</b> Full Name (Last, First, Middle Initial) Mailing Address 108 Commons Drive City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02944-04880</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 1451.30 Category/Type
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<b>C. Michael D Reed</b> Full Name (Last, First, Middle Initial) Mailing Address 109 Spring Street City Trenton State NJ Zip Code 08618 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02945-04881</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 919.10 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3562.40</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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Safanya Searcy</b>		<b>Transaction ID:</b> 30b-01-02946-04882 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 217 17th Avenue		Amount of Each Disbursement this Period 976.37
City Newark State NJ Zip Code 07103	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Saul Shemesh</b>		<b>Transaction ID:</b> 30b-01-02947-04883 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1643 Prince Drive		Amount of Each Disbursement this Period 1265.73
City Cherry Hill State NJ Zip Code 08003	Purpose of Disbursement Salary 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Adam Silverstein</b>		<b>Transaction ID:</b> 30b-01-02948-04884 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 111 Blue Hill Avenue		Amount of Each Disbursement this Period 1229.73
City Fair Lawn State NJ Zip Code 07410	Purpose of Disbursement Salary 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) ..... ▶	<b>3471.83</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. David M Smith</b> Full Name (Last, First, Middle Initial) Mailing Address 50 New Friendship Road City Howell State NJ Zip Code 07731 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: 30b-01-02949-04885</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 854.72 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B. Caitlin J VanOrden</b> Full Name (Last, First, Middle Initial) Mailing Address 1560 Linden Boulevard City Vineland State NJ Zip Code 08361 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: 30b-01-02950-04886</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 739.75 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C. Bryan Walensky</b> Full Name (Last, First, Middle Initial) Mailing Address 76 Dewitt Street City Garfield State NJ Zip Code 07026 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<b>Transaction ID: 30b-01-02951-04887</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Amount of Each Disbursement this Period 1265.73 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2860.20
<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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Charles W Williams</b>		<b>Transaction ID:</b> 30b-01-02952-04888 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 80 High Street		Amount of Each Disbursement this Period 1275.32
City West Orange	State NJ	
Zip Code 07052	Category/Type	
Purpose of Disbursement Salary 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:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Yacco</b>		<b>Transaction ID:</b> 30b-01-02953-04889 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 218 Easton Avenue		Amount of Each Disbursement this Period 718.28
City New Brunswick	State NJ	
Zip Code 08901	Category/Type	
Purpose of Disbursement Salary 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:		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth E. Berry</b>		<b>Transaction ID:</b> 30b-01-02954-04890 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 100 Robbinsville - Allentown Road		Amount of Each Disbursement this Period 1306.62
City Robbinsville	State NJ	
Zip Code 08691	Category/Type	
Purpose of Disbursement Salary 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:		

**SUBTOTAL** of Disbursements This Page (optional) ..... **3300.22**

**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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Daniel C. Dollbaum</b> Full Name (Last, First, Middle Initial) Mailing Address 6 Butler Place City Kearny State NJ Zip Code 07032 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02955-04891</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 2260.91 Category/Type
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<b>B. Richard P McGrath</b> Full Name (Last, First, Middle Initial) Mailing Address 100 Hiram Square City New Brunswick State NJ Zip Code 08901 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02956-04892</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 3018.00 Category/Type
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<b>C. Ray Alcantara</b> Full Name (Last, First, Middle Initial) Mailing Address 52 Wood Lake Drive City Piscataway State NJ Zip Code 08854 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02957-04893</b> Date of Disbursement 08 / 30 / 2006 Amount of Each Disbursement this Period 1967.51 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>7246.42</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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Roberto C Frugone</b> Full Name (Last, First, Middle Initial) Mailing Address 184 Peer Place City Denville State NJ Zip Code 07834 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02958-04894</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006 Amount of Each Disbursement this Period 2258.17 Category/Type
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<b>B. Andre M Richardson</b> Full Name (Last, First, Middle Initial) Mailing Address 1755 JFK Boulevard Apartment 1 City Jersey City State NJ Zip Code 07305 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02959-04895</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006 Amount of Each Disbursement this Period 2370.70 Category/Type
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<b>C. Dale Wolfert</b> Full Name (Last, First, Middle Initial) Mailing Address 59 Bosko Drive City East Brunswick State NJ Zip Code 08816 Purpose of Disbursement Salary 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>Transaction ID: 30b-01-02960-04896</b> Date of Disbursement MM / DD / YYYY 08 / 30 / 2006 Amount of Each Disbursement this Period 1628.97 Category/Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6257.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. United States Federal Government</b>		<b>Transaction ID:</b> 30b-01-02961-04897 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 1671.20
City Washington State DC Zip Code 20001		
Purpose of Disbursement Payroll Taxes 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. United States Federal Government</b>		<b>Transaction ID:</b> 30b-01-02961-04898 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 16163.44
City Washington State DC Zip Code 20001		
Purpose of Disbursement Payroll Taxes 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. State of New Jersey</b>		<b>Transaction ID:</b> 30b-01-02962-04899 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address Department of Treasury		Amount of Each Disbursement this Period 295.60
City Trenton State NJ Zip Code 08608		
Purpose of Disbursement Payroll Taxes 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) ..... ▶	18130.24
<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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. State of New Jersey</b>		<b>Transaction ID:</b> 30b-01-02962-04900 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006
Mailing Address Department of Treasury		Amount of Each Disbursement this Period 2680.42
City Trenton State NJ Zip Code 08608	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) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>B. Andre M Richardson</b>		<b>Transaction ID:</b> 30b-16-04329-04433 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006
Mailing Address 1755 JFK Boulevard Apartment 1		Amount of Each Disbursement this Period 250.00
City Jersey City State NJ Zip Code 07305	Purpose of Disbursement Health Care Stipend 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) ▼	Category/Type

Full Name (Last, First, Middle Initial) <b>C. Gerald Balmir</b>		<b>Transaction ID:</b> 30b-16-04330-04434 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006
Mailing Address 212 Columbia Avenue		Amount of Each Disbursement this Period 250.00
City Trenton State NJ Zip Code 08618	Purpose of Disbursement Health Care Stipend 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) ▼	Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3180.42
<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

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(check only one)

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<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

Full Name (Last, First, Middle Initial) <b>A. Dale Wolfert</b>		<b>Transaction ID:</b> 30b-16-04331-04435 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006
Mailing Address 59 Bosko Drive		Amount of Each Disbursement this Period 250.00
City East Brunswick	State NJ	
Zip Code 08816		
Purpose of Disbursement Health Care Stipend 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) ▼

Full Name (Last, First, Middle Initial) <b>B. Ray Alcantara</b>		<b>Transaction ID:</b> 30b-16-04332-04436 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006
Mailing Address 52 Wood Lake Drive		Amount of Each Disbursement this Period 250.00
City Piscataway	State NJ	
Zip Code 08854		
Purpose of Disbursement Health Care Stipend 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) ▼

Full Name (Last, First, Middle Initial) <b>C. Just Four Wheels</b>		<b>Transaction ID:</b> 30b-16-04333-04437 Date of Disbursement MM / DD / YYYY 08 / 31 / 2006
Mailing Address DBA: JFW Franklin Park 3231A Route 27		Amount of Each Disbursement this Period 2500.00
City Franklin Park	State NJ	
Zip Code 08823		
Purpose of Disbursement Travel Expenses 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>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>145765.10</b>



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
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NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Apollo News Service	Nature of Debt (Purpose): Periodicals
Mailing Address PO Box 598	
City State ZIP Code East Brunswick NJ 08816	

Outstanding Balance Beginning This Period 45.45	<b>Transaction ID: 10-000012</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45.45

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 2971	
City State ZIP Code Omaha NE 68103-2971	

Outstanding Balance Beginning This Period 1797.94	<b>Transaction ID: 10-000017</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1797.94

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor ATX Communications Services, Inc.	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 57194	
City State ZIP Code Philadelphia PA 19111	

Outstanding Balance Beginning This Period 6603.97	<b>Transaction ID: 10-000018</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6603.97

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>8447.36</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 / 81
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Commerce Bank - Visa	Nature of Debt (Purpose): Balance Due - Expenses
Mailing Address P.O. Box 2580	
City State ZIP Code Cherry Hill NJ 08034	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>	<b>Transaction ID: 10-000024</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express	Nature of Debt (Purpose): Delivery Services
Mailing Address P.O. Box 1140 Department A	
City State ZIP Code Memphis TN 38101	

Outstanding Balance Beginning This Period <input type="text" value="34.96"/>	<b>Transaction ID: 10-000013</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="34.96"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Labels & Lists	Nature of Debt (Purpose): Research Materials
Mailing Address 2500 116th Avenue NE	
City State ZIP Code Bellevue WA 98004	

Outstanding Balance Beginning This Period <input type="text" value="9352.22"/>	<b>Transaction ID: 10-000014</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9352.22"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="10387.18"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Liberty Insurance Co.	Nature of Debt (Purpose): Insurance
Mailing Address 525 Route 33	
City State ZIP Code Millstone NJ 07726	

Outstanding Balance Beginning This Period <input type="text" value="615.00"/>	<b>Transaction ID: 10-000021</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="615.00"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor LSG Strategies, Inc.	Nature of Debt (Purpose): Voter Identification
Mailing Address 1001 G Street N.W.	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period <input type="text" value="10559.48"/>	<b>Transaction ID: 10-000019</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10559.48"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Rabinowitz, Trenk, Lubetkin & Tully, PC	Nature of Debt (Purpose): Legal Services
Mailing Address Attorneys at Law 200 Executive Drive, Suite 225	
City State ZIP Code West Orange NJ 07052-3303	

Outstanding Balance Beginning This Period <input type="text" value="92.80"/>	<b>Transaction ID: 10-000015</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="92.80"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="11267.28"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Sprint	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO BoX 740463	
City State ZIP Code Cincinnati OH 45274-0463	

Outstanding Balance Beginning This Period <input type="text" value="381.11"/>	<b>Transaction ID: 10-000022</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="381.11"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor United Parcel Service	Nature of Debt (Purpose): Delivery Services
Mailing Address PO Box 7247-0244	
City State ZIP Code Philadelphia PA 19170-0001	

Outstanding Balance Beginning This Period <input type="text" value="1451.30"/>	<b>Transaction ID: 10-000016</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1451.30"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Telecommunications Services
Mailing Address PO Box 588	
City State ZIP Code Fair Lawn NJ 07410	

Outstanding Balance Beginning This Period <input type="text" value="2097.96"/>	<b>Transaction ID: 10-000023</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2097.96"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="3930.37"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 37 / 81	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Xpedite Systems Inc	Nature of Debt (Purpose): Fax Services
Mailing Address P O Box 14024	
City State ZIP Code Newark NJ 07101	

Outstanding Balance Beginning This Period	<b>Transaction ID: 10-000020</b>	
1003.81		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1003.81

1) <b>SUBTOTALS</b> This Period This Page (optional).....	1003.81
2) <b>TOTALS</b> This Period (last page this line number only).....	35036.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

## SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)

**New Jersey Democratic State Committee**

### RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER <b>General Fundraising</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0016
ACTIVITY OR EVENT IDENTIFIER <b>September 10 2005 Event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0019
ACTIVITY OR EVENT IDENTIFIER <b>September 13 2005 Event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0021
ACTIVITY OR EVENT IDENTIFIER <b>September 29 2005 Event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0023
ACTIVITY OR EVENT IDENTIFIER <b>September 17 2005 Event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0024
ACTIVITY OR EVENT IDENTIFIER <b>May 3 2006 Event</b> <hr/> ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">25.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; display: inline-block;">75.00</div> %  <b>Transaction ID:</b> H2-0037

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	7612.50

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02858
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) General Fundraising	7612.50		Transaction ID: H318a-01-02858-04778
b)			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		7612.50	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a)			Transaction ID:
b)			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT Transfers -- Bank of America	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 24571.37
---	---	--------------------------------------

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	Transaction ID: H318a-01-02859	24571.37
<b>ii) Generic Voter Drive</b> .....	Transaction ID:	
<b>iii) Exempt Activities</b> .....	Transaction ID:	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising .....		
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support .....		
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)	Transaction ID:	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	



**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	502.12

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02860
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) September 10, 2005 Event	502.12		Transaction ID: H318a-01-02860-04775
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		502.12	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	5896.95

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02861
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) September 13, 2005 Event	5896.95		Transaction ID: H318a-01-02861-04776
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		5896.95	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	266.51

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02862
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) September 17, 2005 Event	266.51		Transaction ID: H318a-01-02862-04777
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		266.51	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	486.67

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02863
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) September 29, 2005 Event	486.67		Transaction ID: H318a-01-02863-04778
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		486.67	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 New Jersey Democratic State Committee

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Transfers -- Bank of America	M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	7429.50

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H318a-01-02864
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) <u>May 3, 2006 Event</u>	7429.50		Transaction ID: H318a-01-02864-04779
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		7429.50	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	24571.37
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	22194.25
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	46765.62

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Magelnicki, Lauren N.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 41 Kim Court			Allocated Activity or Event Year-To-Date -545.33		
City	State	Zip Code	Date		
Toms River	NJ	08755	M M / D D / Y Y Y Y	0 8 / 0 1 / 2 0 0 6	
Purpose of Disbursement: Prior Period Void - Invalid Payment			Transaction ID: 21a-02-00008-00008		
Activity or Event Identifier: Admin 01/02					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-152.69		-392.64		-545.33

<b>B. Full Name (Last, First, Middle Initial)</b> Bohnett, Thomas W.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 16 Monterey Drive			Allocated Activity or Event Year-To-Date -878.76		
City	State	Zip Code	Date		
Princeton Junction	NJ	08550	M M / D D / Y Y Y Y	0 8 / 0 1 / 2 0 0 6	
Purpose of Disbursement: Prior Period Void - Invalid Payment			Transaction ID: 21a-02-00009-00009		
Activity or Event Identifier: Admin 01/02					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-93.36		-240.07		-333.43

<b>C. Full Name (Last, First, Middle Initial)</b> Allen, Kathleen M.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 340 Orchard Avenue			Allocated Activity or Event Year-To-Date -1974.28		
City	State	Zip Code	Date		
Somerdale	NJ	08083	M M / D D / Y Y Y Y	0 8 / 0 1 / 2 0 0 6	
Purpose of Disbursement: Prior Period Void - Invalid Payment			Transaction ID: 21a-02-00010-00010		
Activity or Event Identifier: Admin 01/02					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-306.75		-788.77		-1095.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-552.80		-1421.48		-1974.28

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Rutgers CASE Program			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 191 College Avenue			Allocated Activity or Event Year-To-Date -1989.28																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-02-00011-00011			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	1	/	2	0	0	6																
New Brunswick	NJ	08901																							
Purpose of Disbursement: Prior Period Void - Invalid Payment			Category/ Type																						
Activity or Event Identifier: Admin 01/02																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-4.20		-10.80		-15.00

<b>B. Full Name (Last, First, Middle Initial)</b> Farria, Garrick A.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 66 Jackson Avenue #3-B			Allocated Activity or Event Year-To-Date -2019.38																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-02-00012-00012			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	1	/	2	0	0	6																
Hackensack	NJ	07601																							
Purpose of Disbursement: Prior Period Void - Invalid Payment			Category/ Type																						
Activity or Event Identifier: Admin 01/02																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-8.43		-21.67		-30.10

<b>C. Full Name (Last, First, Middle Initial)</b> Laurente, Janice M.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 12 Gainsboro Terrace Apt. #1-B			Allocated Activity or Event Year-To-Date -2078.38																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-02-00013-00013			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	1	/	2	0	0	6																
River Edge	NJ	07661																							
Purpose of Disbursement: Prior Period Void - Invalid Payment			Category/ Type																						
Activity or Event Identifier: Admin 01/02																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-16.52		-42.48		-59.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-29.15		-74.95		-104.10

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Conference Points International			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 66 MacCulloch Avenue			Allocated Activity or Event Year-To-Date -2584.54		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-02-00014-00014		
Morristown	NJ	07960			
Purpose of Disbursement: Prior Period Void - Invalid Payment			Category/ Type		
Activity or Event Identifier: Admin 01/02					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
-141.72		-364.44		-506.16

<b>B. Full Name (Last, First, Middle Initial)</b> Perkins Coie LLP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1201 Third Avenue - 40th Floor			Allocated Activity or Event Year-To-Date 2956.39		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-02-00015-00015		
Seattle	WA	98101-3099			
Purpose of Disbursement: Legal Services			Category/ Type		
Activity or Event Identifier: Admin 01/02					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1551.46		3989.47		5540.93

<b>C. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 276853.85		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02870-0013		
Cherry Hill	NJ	08034			
Purpose of Disbursement: See Memo Items			Category/ Type		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.53		92.29		116.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1434.27		3717.32		5151.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Witherspoon Grill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 25 Witherspoon Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02870-04785			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Princeton	NJ	08540																							
Purpose of Disbursement: Food & Beverage			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.36		31.44		39.80

<b>B. Full Name (Last, First, Middle Initial)</b> Witherspoon Grill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 25 Witherspoon Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02870-04785			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Princeton	NJ	08540																							
Purpose of Disbursement: Food & Beverage			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.23		49.77		63.00

<b>C. Full Name (Last, First, Middle Initial)</b> Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02870-04787			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Cherry Hill	NJ	08034																							
Purpose of Disbursement: Service Charge			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.94		11.08		14.02

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 277236.34																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02871-0013			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Cherry Hill	NJ	08034																							
Purpose of Disbursement: See Memo Items			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.32		302.17		382.49

<b>B. Full Name (Last, First, Middle Initial)</b> Lunello's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 331 Union Boulevard			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02871-04788			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Totowa	NJ	07512																							
Purpose of Disbursement: Food & Beverage			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.65		216.86		274.51

<b>C. Full Name (Last, First, Middle Initial)</b> Lilly's On The Canal			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2 Canal Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02871-04789			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	0	7	/	2	0	0	6																
Lambertville	NJ	08530																							
Purpose of Disbursement: Food & Beverage			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.51		20.75		26.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.32		302.17		382.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Lilly's On The Canal			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2 Canal Street			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	7	/	2	0	0	6																
Lambertville	NJ	08530	Transaction ID: 21a-01-02871-04790																						
Purpose of Disbursement: Food & Beverage			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.98		63.89		80.87

<b>B. Full Name (Last, First, Middle Initial)</b> Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	7	/	2	0	0	6																
Cherry Hill	NJ	08034	Transaction ID: 21a-01-02871-04791																						
Purpose of Disbursement: Service Charge			Category/ Type																						
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.18		0.67		0.85

<b>C. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 277276.82																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	0	7	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	0	7	/	2	0	0	6																
Cherry Hill	NJ	08034	Transaction ID: 21a-01-02872-0013																						
Purpose of Disbursement: See Memo Items			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.50		31.98		40.48

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.50		31.98		40.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

**A.** Full Name (Last, First, Middle Initial)  
Commerce Bank, N.A. - Visa

Mailing Address  
P.O. Box 2580

City State Zip Code  
Cherry Hill NJ 08034

Purpose of Disbursement:  
Service Charge

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

[MEMO ITEM]

Date 08 / 07 / 2006

Transaction ID: 21a-01-02872-04792

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
8.50 + 31.98 = 40.48

**B.** Full Name (Last, First, Middle Initial)  
Commerce Bank - Visa

Mailing Address  
P.O. Box 2580

City State Zip Code  
Cherry Hill NJ 08034

Purpose of Disbursement:  
See Memo Items

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

277495.39

Activity or Event Identifier:  
Admin 05/06

Date 08 / 07 / 2006

Transaction ID: 21a-01-02873-0013

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
45.90 + 172.67 = 218.57

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

Mailing Address  
Route 130 and Route 206

City State Zip Code  
Bordentown NJ 08505

Purpose of Disbursement:  
Food & Beverage

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

[MEMO ITEM]

Date 08 / 07 / 2006

Transaction ID: 21a-01-02873-04793

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
7.98 + 30.03 = 38.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
45.90 + 172.67 = 218.57

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

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

Mailing Address  
1140 River Road

City	State	Zip Code
West Trenton	NJ	08628

Purpose of Disbursement:  
Food & Beverage

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

**[MEMO ITEM]**

Date 08 / 07 / 2006

Transaction ID: 21a-01-02873-04794

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.42		39.19		49.61

**B. Full Name (Last, First, Middle Initial)**  
Metro Italian Family Resturant and Grill

Mailing Address  
172 Scotch Road # 1 Scotch Road

City	State	Zip Code
West Trenton	NJ	08628

Purpose of Disbursement:  
Food & Beverage

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

**[MEMO ITEM]**

Date 08 / 07 / 2006

Transaction ID: 21a-01-02873-04795

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.65		21.27		26.92

**C. Full Name (Last, First, Middle Initial)**  
NJ Association of Womens Business Owners

Mailing Address  
127 US Highway 206 South Suite 28

City	State	Zip Code
Hamilton	NJ	08610

Purpose of Disbursement:  
Event Tickets

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

**[MEMO ITEM]**

Date 08 / 07 / 2006

Transaction ID: 21a-01-02873-04796

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> NJ Association of Womens Business Owners			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 127 US Highway 206 South Suite 28			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02873-04797		
Hamilton	NJ	08610			
Purpose of Disbursement: Event Tickets			Category/ Type		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

<b>B. Full Name (Last, First, Middle Initial)</b> Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02873-04798		
Cherry Hill	NJ	08034			
Purpose of Disbursement: Service Charge			Category/ Type		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.85		3.18		4.03

<b>C. Full Name (Last, First, Middle Initial)</b> Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept 56- 0000191603   Staples Credit Plan - P.O. Box 902			Allocated Activity or Event Year-To-Date 278246.21		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02874-04799		
Des Moines	IA	50368-9020			
Purpose of Disbursement: Office Supplies			Category/ Type		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.67		593.15		750.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.67		593.15		750.82

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept 56- 0000191603   Staples Credit Plan - P.O. Box 902			Allocated Activity or Event Year-To-Date 278480.14		
City	State	Zip Code	Category/Type		
Des Moines	IA	50368-9020			
Purpose of Disbursement: Office Supplies					
Activity or Event Identifier: Admin 05/06			Date <input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02874-04800		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.13		184.80		233.93

<b>B. Full Name (Last, First, Middle Initial)</b> Blue State Technologies			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 352 Ford Avenue			Allocated Activity or Event Year-To-Date 284480.14		
City	State	Zip Code	Category/Type		
Fords	NJ	08863			
Purpose of Disbursement: IT Consulting Services					
Activity or Event Identifier: Admin 05/06			Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02878-04804		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		4740.00		6000.00

<b>C. Full Name (Last, First, Middle Initial)</b> Common Sense Consulting			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 222 Stony Brook Road			Allocated Activity or Event Year-To-Date 292480.14		
City	State	Zip Code	Category/Type		
Hopewell	NJ	08525			
Purpose of Disbursement: Compliance Consulting Services					
Activity or Event Identifier: Admin 05/06			Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02880-04806		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1680.00		6320.00		8000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2989.13		11244.80		14233.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
Jersey City Lesbian and Gay Outreach  
**Mailing Address**  
113 Pavonia Avenue #247  
**City** Jersey City **State** NJ **Zip Code** 07302  
**Purpose of Disbursement:**  
Booth Rental  
**Activity or Event Identifier:**  
Admin 05/06

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
292617.14  
**Date** 08 / 10 / 2006  
**Transaction ID:** 21a-01-02892-04818

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.77		108.23		137.00

**B. Full Name (Last, First, Middle Initial)**  
Jersey City Lesbian and Gay Outreach  
**Mailing Address**  
113 Pavonia Avenue #247  
**City** Jersey City **State** NJ **Zip Code** 07302  
**Purpose of Disbursement:**  
Booth Rental (Deposit)  
**Activity or Event Identifier:**  
Admin 05/06

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
292642.14  
**Date** 08 / 10 / 2006  
**Transaction ID:** 21a-01-02893-04819

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.25		19.75		25.00

**C. Full Name (Last, First, Middle Initial)**  
Campbell, Mary  
**Mailing Address**  
2055 Lawrence Road  
**City** Lawrenceville **State** NJ **Zip Code** 08648  
**Purpose of Disbursement:**  
Salary  
**Activity or Event Identifier:**  
Admin 05/06

**Type of Allocated Activity:**  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC  
**Allocated Activity or Event Year-To-Date**  
293392.67  
**Date** 08 / 15 / 2006  
**Transaction ID:** 21a-01-02897-04823

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.61		592.92		750.53

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
191.63		720.90		912.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Brown, Carmen N.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Jacob Court			Allocated Activity or Event Year-To-Date 294452.91		
City Ewing	State NJ	Zip Code 08628	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-01-02898-04824		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.65		837.59		1060.24

<b>B. Full Name (Last, First, Middle Initial)</b> Martin, Margaret L.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 777 West State Street, Apt. 9B			Allocated Activity or Event Year-To-Date 295939.21		
City Trenton	State NJ	Zip Code 08618	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-01-02899-04825		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.12		1174.18		1486.30

<b>C. Full Name (Last, First, Middle Initial)</b> Aetna US Health Care			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 7247-0221			Allocated Activity or Event Year-To-Date 296311.31		
City Philadelphia	State PA	Zip Code 19170-0221	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Insurance			Transaction ID: 21a-01-02907-05052		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.14		293.96		372.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
612.91		2305.73		2918.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Montgomery, Colleen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2 Mazza Drive			Allocated Activity or Event Year-To-Date 296395.55		
City Northfield	State NJ	Zip Code 08225	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Mileage			Transaction ID: 21a-01-02908-04835		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.69		66.55		84.24

<b>B. Full Name (Last, First, Middle Initial)</b> The CIT Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Attn: Customer Service   P.O. Box 550599			Allocated Activity or Event Year-To-Date 297729.59		
City Jacksonville	State FL	Zip Code 32255-0599	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Office Equipment			Transaction ID: 21a-01-02909-04836		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
280.15		1053.89		1334.04

<b>C. Full Name (Last, First, Middle Initial)</b> Comcast Cablevision			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P O Box 840			Allocated Activity or Event Year-To-Date 298173.29		
City Newark	State NJ	Zip Code 07101-0840	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Internet Services			Transaction ID: 21a-01-02910-04837		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.18		350.52		443.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
391.02		1470.96		1861.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 298479.56		
City Cherry Hill	State NJ	Zip Code 08034	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: See Memo Items			Transaction ID: 21a-01-02911-0013		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.32		241.95		306.27

<b>B. Full Name (Last, First, Middle Initial)</b> Marriott - Lafayette Yard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 West Lafayette Street			Allocated Activity or Event Year-To-Date 0.00		
City Trenton	State NJ	Zip Code 08608	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Travel Expenses			Transaction ID: 21a-01-02911-04838		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.21		109.87		139.08

<b>C. Full Name (Last, First, Middle Initial)</b> Marsilio's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 541 Roebling Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Trenton	State NJ	Zip Code 08611	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Food & Beverage			Transaction ID: 21a-01-02911-04839		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.86		131.14		166.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.32		241.95		306.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Commerce Bank, N.A. - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date [0.00]		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Cherry Hill	NJ	08034	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Service Charge			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
			Transaction ID: 21a-01-02911-04840		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[0.25]		[0.94]		[1.19]

<b>B. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date [298573.44]		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Cherry Hill	NJ	08034	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: See Memo Items			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Admin 05/06			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
			Transaction ID: 21a-01-02912-0013		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[19.71]		[74.17]		[93.88]

<b>C. Full Name (Last, First, Middle Initial)</b> Marsilio's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 541 Roebling Avenue			Allocated Activity or Event Year-To-Date [0.00]		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Trenton	NJ	08611	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Food & Beverage			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
			Transaction ID: 21a-01-02912-04841		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[19.71]		[74.17]		[93.88]

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[19.71]		[74.17]		[93.88]

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Commerce Bank - Visa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O. Box 2580			Allocated Activity or Event Year-To-Date 299989.03																						
City	State	Zip Code	Category/ Type																						
Cherry Hill	NJ	08034																							
Purpose of Disbursement: See Memo Items			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02913-0013																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
297.27		1118.32		1415.59

<b>B. Full Name (Last, First, Middle Initial)</b> ExxonMobil			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 3164 Route 88			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Category/ Type																						
Point Pleasant	NJ	08742																							
Purpose of Disbursement: Travel Expenses			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Transaction ID: 21a-01-02913-04842																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.37		35.24		44.61

<b>C. Full Name (Last, First, Middle Initial)</b> 1 & 1 Internet			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 701 Lee Road, Suite 300			Allocated Activity or Event Year-To-Date 0.00																						
City	State	Zip Code	Category/ Type																						
Chesterbrook	PA	10987																							
Purpose of Disbursement: Internet Services			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Transaction ID: 21a-01-02913-04843																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.59		47.38		59.97

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
297.27		1118.32		1415.59

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Gaebels			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 85 Church Street			Allocated Activity or Event Year-To-Date 0.00		
City New Brunswick	State NJ	Zip Code 08901	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Food & Beverage			Transaction ID: 21a-01-02913-04844		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.47		923.45		1168.92

<b>B. Full Name (Last, First, Middle Initial)</b> 1 & 1 Internet			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 701 Lee Road, Suite 300			Allocated Activity or Event Year-To-Date 0.00		
City Chesterbrook	State PA	Zip Code 10987	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Internet Services			Transaction ID: 21a-01-02913-04845		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.59		47.38		59.97

<b>C. Full Name (Last, First, Middle Initial)</b> La Villa Family Restaurant			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 21 South Pennsylvania Avenue			Allocated Activity or Event Year-To-Date 0.00		
City Morrisville	State PA	Zip Code 19067	Date <input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Food & Beverage			Transaction ID: 21a-01-02913-04846		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.72		62.92		79.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

A. Full Name (Last, First, Middle Initial)  
Commerce Bank, N.A. - Visa

Mailing Address  
P.O. Box 2580

City State Zip Code  
Cherry Hill NJ 08034

Purpose of Disbursement:  
Service Charge

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

[MEMO ITEM]

Date 08 / 22 / 2006

Transaction ID: 21a-01-02913-04847

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
0.52 + 1.96 = 2.48

B. Full Name (Last, First, Middle Initial)  
Commerce Bank - Visa

Mailing Address  
P.O. Box 2580

City State Zip Code  
Cherry Hill NJ 08034

Purpose of Disbursement:  
See Memo Items

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

300029.51

Activity or Event Identifier:  
Admin 05/06

Date 08 / 22 / 2006

Transaction ID: 21a-01-02914-0013

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
8.50 + 31.98 = 40.48

C. Full Name (Last, First, Middle Initial)  
Commerce Bank, N.A. - Visa

Mailing Address  
P.O. Box 2580

City State Zip Code  
Cherry Hill NJ 08034

Purpose of Disbursement:  
Service Charge

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:  
Admin 05/06

[MEMO ITEM]

Date 08 / 22 / 2006

Transaction ID: 21a-01-02914-04848

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
8.50 + 31.98 = 40.48

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT  
8.50 + 31.98 = 40.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> The New Jersey Chamber of Commerce			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 216 West State Street			Allocated Activity or Event Year-To-Date 307761.38																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02915-04849			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	2	2	/	2	0	0	6																
Trenton	NJ	08608																							
Purpose of Disbursement: Travel Expenses			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1623.69		6108.18		7731.87

<b>B. Full Name (Last, First, Middle Initial)</b> The New Jersey Chamber of Commerce			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 216 West State Street			Allocated Activity or Event Year-To-Date 309143.59																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02915-04850			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	2	2	/	2	0	0	6																
Trenton	NJ	08608																							
Purpose of Disbursement: Travel Expenses			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
290.26		1091.95		1382.21

<b>C. Full Name (Last, First, Middle Initial)</b> The New Jersey Chamber of Commerce			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 216 West State Street			Allocated Activity or Event Year-To-Date 309965.80																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: 21a-01-02915-04851			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	2	2	/	2	0	0	6																
Trenton	NJ	08608																							
Purpose of Disbursement: Travel Expenses			Category/ Type																						
Activity or Event Identifier: Admin 05/06																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
172.66		649.55		822.21

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2086.61		7849.68		9936.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Metropolitan Telecommunications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 9660			Allocated Activity or Event Year-To-Date 311737.32																						
City	State	Zip Code	Category/ Type																						
Manchester	NH	03108-9660																							
Purpose of Disbursement: Telecommunications Services			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02917-04853																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
372.02		1399.50		1771.52

<b>B. Full Name (Last, First, Middle Initial)</b> PSE&G			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O.Box 14106			Allocated Activity or Event Year-To-Date 312088.78																						
City	State	Zip Code	Category/ Type																						
New Brunswick	NJ	08906-4106																							
Purpose of Disbursement: Utilities			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02918-04854																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.81		277.65		351.46

<b>C. Full Name (Last, First, Middle Initial)</b> PSE&G			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P.O.Box 14106			Allocated Activity or Event Year-To-Date 312827.43																						
City	State	Zip Code	Category/ Type																						
New Brunswick	NJ	08906-4106																							
Purpose of Disbursement: Utilities			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02919-04855																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.12		583.53		738.65

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
600.95		2260.68		2861.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> PSE&G			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 14105			Allocated Activity or Event Year-To-Date 312907.98																						
City New Brunswick	State NJ	Zip Code 08906-4105	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Purpose of Disbursement: Utilities			Category/ Type																						
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02920-04856																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.92		63.63		80.55

<b>B. Full Name (Last, First, Middle Initial)</b> Trenton Water Works			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 333 Cortland Street   PO Box 528			Allocated Activity or Event Year-To-Date 313076.83																						
City Trenton	State NJ	Zip Code 08603-0528	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Purpose of Disbursement: Utilities			Category/ Type																						
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02921-04857																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.46		133.39		168.85

<b>C. Full Name (Last, First, Middle Initial)</b> Belmont and Crystal Springs			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4170 Tanners Creek Drive			Allocated Activity or Event Year-To-Date 313180.47																						
City Flowery Branch	State GA	Zip Code 30542	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	2	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	2	2	/	2	0	0	6																
Purpose of Disbursement: Office Services - Water			Category/ Type																						
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02922-04858																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.76		81.88		103.64

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.14		278.90		353.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1270			Allocated Activity or Event Year-To-Date 314148.82		
City Newark	State NJ	Zip Code 07102	Date MM / DD / YYYY 08 / 29 / 2006		
Purpose of Disbursement: See Memo Items			Category/Type		
Activity or Event Identifier: Admin 05/06			Transaction ID: 21a-01-02963-0013		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.35		765.00		968.35

<b>B. Full Name (Last, First, Middle Initial)</b> Marriott - Lafayette Yard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 West Lafayette Street			Allocated Activity or Event Year-To-Date 0.00		
City Trenton	State NJ	Zip Code 08608	Date MM / DD / YYYY 08 / 29 / 2006		
Purpose of Disbursement: Travel Expenses			Category/Type		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Transaction ID: 21a-01-02963-04901		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.70		344.97		436.67

<b>C. Full Name (Last, First, Middle Initial)</b> Marriott - Lafayette Yard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 West Lafayette Street			Allocated Activity or Event Year-To-Date 0.00		
City Trenton	State NJ	Zip Code 08608	Date MM / DD / YYYY 08 / 29 / 2006		
Purpose of Disbursement: Travel Expenses			Category/Type		
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Transaction ID: 21a-01-02963-04902		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.41		219.75		278.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.35		765.00		968.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Marriott - Lafayette Yard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 West Lafayette Street			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/Type		
Trenton	NJ	08608			
Purpose of Disbursement: Travel Expenses					
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Date <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02963-04903		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.14		102.12		129.26

<b>B. Full Name (Last, First, Middle Initial)</b> Marriott - Lafayette Yard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 West Lafayette Street			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/Type		
Trenton	NJ	08608			
Purpose of Disbursement: Travel Expenses					
Activity or Event Identifier: Admin 05/06 <b>[MEMO ITEM]</b>			Date <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02963-04904		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.09		98.17		124.26

<b>C. Full Name (Last, First, Middle Initial)</b> Campbell, Mary			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2055 Lawrence Road			Allocated Activity or Event Year-To-Date 315115.18		
City	State	Zip Code	Category/Type		
Lawrenceville	NJ	08648			
Purpose of Disbursement: Salary					
Activity or Event Identifier: Admin 05/06			Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2006"/> <b>Transaction ID:</b> 21a-01-02926-04862		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.94		763.42		966.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
202.94		763.42		966.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> Brown, Carmen N.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Jacob Court			Allocated Activity or Event Year-To-Date 316175.42		
City Ewing	State NJ	Zip Code 08628	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-01-02927-04863		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
222.65		837.59		1060.24

<b>B. Full Name (Last, First, Middle Initial)</b> Martin, Margaret L.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 777 West State Street, Apt. 9B			Allocated Activity or Event Year-To-Date 317661.71		
City Trenton	State NJ	Zip Code 08618	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: 21a-01-02928-04864		
Activity or Event Identifier: Admin 05/06					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
312.12		1174.17		1486.29

<b>C. Full Name (Last, First, Middle Initial)</b> American Express			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 53852			Allocated Activity or Event Year-To-Date 72323.48		
City Phoenix	State AZ	Zip Code 85072	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-02982-04927		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.43		61.29		81.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
555.20		2073.05		2628.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

<b>A. Full Name (Last, First, Middle Initial)</b> E-OnlineData			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5 Milk Street			Allocated Activity or Event Year-To-Date 72358.48		
City Portland	State ME	Zip Code 04101	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-02983-04928		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.75		26.25		35.00

<b>B. Full Name (Last, First, Middle Initial)</b> Nova Information Systems			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7300 Chapman Highway			Allocated Activity or Event Year-To-Date 72376.23		
City Knoxville	State TN	Zip Code 37920	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Credit Card Processing Fees			Transaction ID: 21a-01-02984-04929		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.44		13.31		17.75

<b>C. Full Name (Last, First, Middle Initial)</b> Mantz Advisory Group, LLC			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10709 Great Arbor Drive			Allocated Activity or Event Year-To-Date 78626.23		
City Potomac	State MD	Zip Code 20854	Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Fundraising Consulting Services			Transaction ID: 21a-01-02875-04801		
Activity or Event Identifier: General Fundraising					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1562.50		4687.50		6250.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1575.69		4727.06		6302.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
New Jersey Democratic State Committee

**A. Full Name (Last, First, Middle Initial)**  
Kelly Maer, Fundraising Consultant

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Mailing Address  
307 West Mount Vernon Avenue

City	State	Zip Code
Haddonfield	NJ	08033

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Purpose of Disbursement:  
Fundraising Consulting Services

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Activity or Event Identifier:  
General Fundraising

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
85626.23

Date 

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

Transaction ID: 21a-01-02879-04805

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1750.00		5250.00		7000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1750.00		5250.00		7000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
12768.08	44497.46	57265.54

**Image# 26960564511**

Form/Schedule: **SA12**      Credit Card Program Proceeds  
Transaction ID: **12-01-02876-04802**

Form/Schedule: **H4**      This entity is a consultant, not an employee of the committee.  
Transaction ID: **21a-01-02879-04805**

\*\*\*\*\*



**Image# 26960564512**

Form/Schedule: **H4** Not Related to Voter Registration  
Transaction ID: **21a-01-02892-04818**

Form/Schedule: **H4** Not Related to Voter Registration - Returned Deposit Pending Void  
Transaction ID: **21a-01-02893-04819**

\*\*\*\*\*

Image# 26960564513

Form/Schedule: **SA12** The July Monthly Report included Memo Schedule A entries for contributions raised by the NJ Party Victory Fund Program. At the time of reporting, the committee had not received its share of the proceeds. The committee received a transfer related to the memo entries on 08-24-2006.  
Transaction ID: **12-01-02923-04339**

Form/Schedule: **SB30b** Previously erroneously reported on schedule H4. Paid entirely with federal funds, no part of this transaction was reimbursed by non-federal funds.  
Transaction ID: **30b-16-04292-04339**

\*\*\*\*\*

**Image# 26960564514**

Form/Schedule: **H3** This transaction relates to fundraising activity 07-01-2006 to 07-31-2006

Transaction ID: **H318a-01-02858**

Form/Schedule: **H3** This transaction relates to fundraising activity 07-01-2006 to 07-31-2006

Transaction ID: **H318a-01-02858-04773**

\*\*\*\*\*

**Image# 26960564515**

Form/Schedule: **H3**            This transaction relates to administrative activity 07-01-2006 to 07-31-2006  
Transaction ID: **H318a-01-02859**

Form/Schedule: **H3**            This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02860**

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**Image# 26960564516**

Form/Schedule: **H3**            This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02860-04775**

Form/Schedule: **H3**            This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02861**

\*\*\*\*\*

**Image# 26960564517**

Form/Schedule: **H3**                      This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02861-04776**

Form/Schedule: **H3**                      This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02862**

\*\*\*\*\*

**Image# 26960564518**

Form/Schedule: **H3**                      This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02862-04777**

Form/Schedule: **H3**                      This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02863**

\*\*\*\*\*

**Image# 26960564519**

Form/Schedule: **H3**            This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02863-04778**

Form/Schedule: **H3**            This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02864**

\*\*\*\*\*



Image# 26960564520

Form/Schedule: **H3** This transaction relates to fundraising activity on 07-25-2006  
Transaction ID: **H318a-01-02864-04779**

Form/Schedule: **F3XA** No transactions reported this period on schedule H4 for salary and insurance related to employees who spent more than 25% of there time on FEA.  
Transaction ID:

\*\*\*\*\*