

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Brent 4 Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	18052.03	49342.40
(b) Total Contribution Refunds (from Line 20(d))	0.00	9.95
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18052.03	49332.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32026.54	45948.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	32026.54	45948.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3384.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2415.40	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Brent 4 Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15667.49	44438.86
(ii) Unitemized	2384.54	4874.54
(iii) TOTAL of contributions from individuals	18052.03	49313.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	29.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	18052.03	49342.40
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	18052.03	49342.40

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32026.54	45948.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	9.95
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	9.95
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	32026.54	45958.09

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	17358.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	18052.03
25. SUBTOTAL (add Line 23 and Line 24).....	35410.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32026.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3384.31

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

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

FOR LINE NUMBER: PAGE 5 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Adams, David, , ,

Mailing Address 10 Woodbridge Center Dr

City Woodbridge State NJ Zip Code 07095

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

Name of Employer Structure Tone Occupation Account Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period
400.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Bellantoni, Ernest, , ,

Mailing Address 2828 Dove St

City San Diego State CA Zip Code 92103

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.4294

Amount of Each Receipt this Period
250.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Bellantoni, Ernest, , ,

Mailing Address 2828 Dove St

City San Diego State CA Zip Code 92103

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : SA11AI.4348

Amount of Each Receipt this Period
200.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Bruno, Dori, , ,

Mailing Address 535 W 110th St
Apt 5F

City New York State NY Zip Code 10025

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

Name of Employer Occupation
Lon Gundie LLC Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.4296

Amount of Each Receipt this Period
250.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Chiles, Sarah, , ,

Mailing Address 59 Third Ave

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Occupation
Redlich Horwitz Foundation Executive Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period
400.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Draznin, Arthur, , ,

Mailing Address 125 Park Ave

City New York State NY Zip Code 10017

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

Name of Employer Occupation
Newmark Grubb Knight Frank Executive Managing Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.4288

Amount of Each Receipt this Period
400.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Fitzpatrick, Thomas, , ,

Mailing Address 1453 Park Garden Ln

City Reston State VA Zip Code 20194

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

Name of Employer Tuition Options Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
400.00

Memo Item Contribution

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

Mailing Address 34 Ocean Blvd

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Middletown Twp BOA Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4369

Amount of Each Receipt this Period
400.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Harmon, Mike, , ,

Mailing Address 33 Bonnie Brae

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

Transaction ID : SA11AI.4277

Amount of Each Receipt this Period
250.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Ivancich, Kara, , ,

Mailing Address 203 Spruce Tree Rd

City Radnor State PA Zip Code 19087

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.4316

Amount of Each Receipt this Period
250.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Krauss, Jim, , ,

Mailing Address 77 Bayside Dr

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Anchin Block & Anchin LLP Occupation Senior Advisor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4367

Amount of Each Receipt this Period
300.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Lapham, Craig, , ,

Mailing Address 125 E 84th St Apt 7B

City New York State NY Zip Code 10028

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

Name of Employer The Lapham Group Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2016

Transaction ID : SA11AI.4304

Amount of Each Receipt this Period
250.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Marsella, Deborah, , ,

Mailing Address 140 Mountain Rd

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.4328

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Nicolosi, Dan, , ,

Mailing Address 6501 Red Hook Plaza Ste 201

City St Thomas State VI Zip Code 00802

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

Name of Employer Self Employed Occupation Trader

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
317.49

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4380

Amount of Each Receipt this Period
317.49

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Nolte, Carol, , ,

Mailing Address 105 Bay Ave

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer CJ Nolte Co Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2016

Transaction ID : SA11AI.4300

Amount of Each Receipt this Period
500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 1817.49

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 31	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Pizzo, Kenneth, S, , Sr.

Mailing Address 1065 US Hwy 22

City Bridgewater	State NJ	Zip Code 08807
---------------------	-------------	-------------------

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

Name of Employer Pizzo & Pizzo	Occupation President
-----------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period

1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Pizzo, Kenneth, , , Jr.

Mailing Address 37 Kenworthy Ct

City Far Hills	State NJ	Zip Code 07931
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pizzo & Pizzo	Occupation Executive
-----------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period

500.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Pizzo, Meaghan, R, ,

Mailing Address 37 Kenworthy Ct

City Far Hills	State NJ	Zip Code 07931
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FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.4336

Amount of Each Receipt this Period

500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶	2000.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Pomanowski, Wayne, , ,

Mailing Address 554 Morristown Rd

City Matawan State NJ Zip Code 07747

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

Name of Employer Key Asset Mgmt Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2016

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period
 300.00

Memo Item
 In-kind - Office Rent

B. Full Name (Last, First, Middle Initial)
Pomanowski, Wayne, , ,

Mailing Address 554 Morristown Rd

City Matawan State NJ Zip Code 07747

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

Name of Employer Key Asset Mgmt Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.4523

Amount of Each Receipt this Period
 300.00

Memo Item
 In-kind - Office Rent

C. Full Name (Last, First, Middle Initial)
Pomanowski, Wayne, , ,

Mailing Address 554 Morristown Rd

City Matawan State NJ Zip Code 07747

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

Name of Employer Key Asset Mgmt Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016

Transaction ID : SA11AI.4524

Amount of Each Receipt this Period
 300.00

Memo Item
 In-kind - Office Rent

SUBTOTAL of Receipts This Page (optional)..... ▶	900.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Puckett, Thomas, , ,

Mailing Address PO Box 9063

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer HPC Puckett & CO Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.4318

Amount of Each Receipt this Period
 1000.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Schmelz, Kristina, , ,

Mailing Address 810 Hwy 35

City Ocean Twp State NJ Zip Code 07712

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

Name of Employer Sea View Auto Corp Occupation Counsel

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2016

Transaction ID : SA11AI.4374

Amount of Each Receipt this Period
 400.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Shenk, Kyle, , ,

Mailing Address 43 Third Ave

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Service Now Occupation Sales Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2016

Transaction ID : SA11AI.4378

Amount of Each Receipt this Period
 400.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶	1800.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 31
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Sherman, Gerald, M, ,
Mailing Address 3 Geraldine Ct

City Farmingdale State NJ Zip Code 07727

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

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.4332

Amount of Each Receipt this Period
 _____ 500.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Sippelle, Scott, , ,
Mailing Address 81 Chambers St

City Princeton State NJ Zip Code 08542

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

Name of Employer Westland Ventures Occupation Executive

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11AI.4320

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Thuss, Corinna, , ,
Mailing Address 284 Ocean Blvd

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer Brightwork Events Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2016

Transaction ID : SA11AI.4365

Amount of Each Receipt this Period
 _____ 300.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 1800.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 31
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial)
Tidswell, Susan, , ,

Mailing Address 15 Belvidere Rd

City Atlantic Highlands State NJ Zip Code 07716

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

Name of Employer CRO Inc Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.4292

Amount of Each Receipt this Period
300.00

Memo Item Contribution

B. Full Name (Last, First, Middle Initial)
Venezia, Kevin, , ,

Mailing Address 10 Ardsley Ct

City Denville State NJ Zip Code 07834

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

Name of Employer Damin Sales Inc Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2016

Transaction ID : SA11AI.4363

Amount of Each Receipt this Period
600.00

Memo Item Contribution

C. Full Name (Last, First, Middle Initial)
Walther, Artur, , ,

Mailing Address 1035 5th Ave PHN

City New York State NY Zip Code 10028

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

Name of Employer Self Employed Occupation Art Collector

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : SA11AI.4284

Amount of Each Receipt this Period
2700.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	15667.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Authorize.net			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016		
Mailing Address PO Box 8999			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 113.21		
Purpose of Disbursement CC Processing Fees		Category/ Type 001	Transaction ID : SB17.4394		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Authorize.net			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2016		
Mailing Address PO Box 8999			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 267.28		
Purpose of Disbursement CC Processing Fees		Category/ Type 001	Transaction ID : SB17.4399		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Authorize.net			Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2016		
Mailing Address PO Box 8999			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94128	Amount of Each Disbursement this Period 108.01		
Purpose of Disbursement CC Processing Fees		Category/ Type 001	Transaction ID : SB17.4402		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	488.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Brinkman, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2016	
Mailing Address 1 Windsor Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Compliance		Category/ Type 001	Transaction ID : SB17.4391	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Brinkman, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 1 Windsor Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 28.75	
Purpose of Disbursement Courier		Category/ Type 001	Transaction ID : SB17.4393	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Brinkman, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 1 Windsor Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Compliance		Category/ Type 001	Transaction ID : SB17.4398	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1028.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Brinkman, Brittany, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 1 Windsor Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Compliance		Category/ Type 001	Transaction ID : SB17.4400	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Chris Russell Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2016	
Mailing Address 5 Banyan Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement PR Consulting		Category/ Type 001	Transaction ID : SB17.4405	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Chris Russell Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016	
Mailing Address 5 Banyan Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 7500.00	
Purpose of Disbursement Research		Category/ Type 005	Transaction ID : SB17.4408	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	9500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Chris Russell Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016	
Mailing Address 5 Banyan Ct			FEC Identification Number C	
City Jackson	State NJ	Zip Code 08527	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement PR Consulting		Category/ Type 001	Transaction ID : SB17.4409	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Citi Cards			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address PO Box 9001037			FEC Identification Number C	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 1926.31	
Purpose of Disbursement Credit Card - See Below		Category/ Type 001	Transaction ID : SB17.4421	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Omni Shoreham			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address 2500 Calvert St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20008	Amount of Each Disbursement this Period 296.56	
Purpose of Disbursement Candidate Travel		Category/ Type 002	Transaction ID : SB17.4421.5	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3426.31
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 250.75	
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4421.21	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Hailey's Harp and Pub			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address 400 Main St			FEC Identification Number C	
City Metuchen	State NJ	Zip Code 08840	Amount of Each Disbursement this Period 593.75	
Purpose of Disbursement Fundraising Event Cost		Category/ Type 003	Transaction ID : SB17.4421.22	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Citi Cards			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016	
Mailing Address PO Box 9001037			FEC Identification Number C	
City Louisville	State KY	Zip Code 40290	Amount of Each Disbursement this Period 13.57	
Purpose of Disbursement Merchant Fees		Category/ Type 001	Transaction ID : SB17.4421.23	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94205
Purpose of Disbursement Advertising	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 43.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4421.24
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290
Purpose of Disbursement Credit Card - See Below	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1223.71
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4423
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016
Mailing Address 1 Hacker Way		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94205
Purpose of Disbursement Advertising	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4423.0
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1223.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290
Purpose of Disbursement Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4423.1 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290
Purpose of Disbursement Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 28.98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4423.2 <input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016
Mailing Address 1515 NJ 35		FEC Identification Number C
City Middletown	State NJ	Zip Code 07748
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 434.92
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4423.3 <input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 20.00		
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4423.4		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 52.06		
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4423.5		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 50.43		
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4423.8		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290
Purpose of Disbursement Credit Card - See Below	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1092.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4424
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290
Purpose of Disbursement Merchant Fees	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 14.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4424.4
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016
Mailing Address 1515 NJ 35		FEC Identification Number C
City Middletown	State NJ	Zip Code 07748
Purpose of Disbursement Office Supplies	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 21.39
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4424.9
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1092.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 59.76		
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4424.10		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94205	Amount of Each Disbursement this Period 250.51		
Purpose of Disbursement Advertising		Category/ Type 004	Transaction ID : SB17.4424.11		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2016		
Mailing Address 1515 NJ 35			FEC Identification Number C		
City Middletown	State NJ	Zip Code 07748	Amount of Each Disbursement this Period 248.70		
Purpose of Disbursement Office Supplies		Category/ Type 001	Transaction ID : SB17.4424.16		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Clark Hill PLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2016
Mailing Address 601 Pennsylvania Ave NW North Bldg Ste 1000		FEC Identification Number C
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Legal Services	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 1395.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4403 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Enterprise Public Affairs		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016
Mailing Address PO Box 634		FEC Identification Number C
City Allentown	State NJ	Zip Code 08501
Purpose of Disbursement Production/Printing	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period 3885.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4410 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Eventbrite		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016
Mailing Address 410 Townsend St Ste 300		FEC Identification Number C
City San Francisco	State CA	Zip Code 94107
Purpose of Disbursement CC Processing Fees	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 210.18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.4419 <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5491.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Eventbrite			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2016		
Mailing Address 410 Townsend St Ste 300			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94107	Amount of Each Disbursement this Period 35.00		
Purpose of Disbursement CC Processing Fees		Category/ Type 001	Transaction ID : SB17.4420		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Fitzsimmons Communications			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2016		
Mailing Address 44 Hartshorn Dr			FEC Identification Number C		
City Colts Neck	State NJ	Zip Code 07722	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement Autocalls		Category/ Type 003	Transaction ID : SB17.4412		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Fitzsimmons Communications			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address 44 Hartshorn Dr			FEC Identification Number C		
City Colts Neck	State NJ	Zip Code 07722	Amount of Each Disbursement this Period 280.00		
Purpose of Disbursement Autocalls		Category/ Type 003	Transaction ID : SB17.4416		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	635.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Gallco Media			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2016	
Mailing Address PO Box 67			FEC Identification Number C	
City Belford	State NJ	Zip Code 07718	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Consulting		Category/ Type 001	Transaction ID : SB17.4395	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Gallco Media			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016	
Mailing Address PO Box 67			FEC Identification Number C	
City Belford	State NJ	Zip Code 07718	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Consulting/Advertising		Category/ Type 004	Transaction ID : SB17.4415	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Iurilli, Pat, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2016	
Mailing Address 806 Benner St			FEC Identification Number C	
City Highland Park	State NJ	Zip Code 08904	Amount of Each Disbursement this Period 700.00	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.4396	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Iurilli, Pat, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016
Mailing Address 806 Benner St		FEC Identification Number C
City Highland Park	State NJ	Zip Code 08904
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 660.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4401
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Parkway Printing		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2016
Mailing Address 52 N Main St		FEC Identification Number C
City Marlboro	State NJ	Zip Code 07746
Purpose of Disbursement Printing	Category/ Type 006	
Candidate Name		Amount of Each Disbursement this Period 367.55
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4414
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Pomanowski, Wayne, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2016
Mailing Address 554 Morristown Rd		FEC Identification Number C
City Matawan	State NJ	Zip Code 07747
Purpose of Disbursement In-kind - Office Rent	Category/ Type	
Candidate Name		Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4527
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1327.55
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Pomanowski, Wayne, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 554 Morristown Rd			FEC Identification Number C		
City Matawan	State NJ	Zip Code 07747	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement In-kind - Office Rent		Category/ Type	Transaction ID : SB17.4526		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Pomanowski, Wayne, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address 554 Morristown Rd			FEC Identification Number C		
City Matawan	State NJ	Zip Code 07747	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement In-kind - Office Rent		Category/ Type	Transaction ID : SB17.4525		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Scharfenberger, Daniel, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 20 Seagull Ln			FEC Identification Number C		
City Lincroft	State NJ	Zip Code 07738	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.4407		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 31		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Brent 4 Congress

Full Name (Last, First, Middle Initial) A. Sonnek-Schmelz, Brent, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2016
Mailing Address 51 Ocean Blvd		FEC Identification Number C H6NJ06229
City Atlantic Highlands	State NJ	Zip Code 07716
Purpose of Disbursement Advertising/Research	004 Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4521
State: NJ District: 06	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	32013.67

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Brent 4 Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sonnek-Schmelz, Brent, , ,			Nature of Debt (Purpose): Travel/Advertising/Research/Website Hosting/Fundraising Supplies/Mileage
Mailing Address 51 Ocean Blvd			
City Atlantic Highlands	State NJ	Zip Code 07716	

Outstanding Balance Beginning This Period 4434.40	Transaction ID : SD10.4159	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 1934.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sonnek-Schmelz, Brent, , ,			Nature of Debt (Purpose): Travel/Mileage/Meals
Mailing Address 51 Ocean Blvd			
City Atlantic Highlands	State NJ	Zip Code 07716	

Outstanding Balance Beginning This Period 481.00	Transaction ID : SD10.4266	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 481.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	2415.40
2) TOTALS This Period (last page this line number only)	2415.40
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2415.40