

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

NORPAC

ADDRESS (number and street) PO Box 5595

Check if different than previously reported. (ACC)

Englewood NJ 07631

2. **FEC IDENTIFICATION NUMBER** C00247403

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input checked="" type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post**-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 04 01 2009 through 04 30 2009

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 Karen Pichkhadze

Signature of Treasurer Electronically Filed by Karen Pichkhadze Date 10 21 2009

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

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

A. Form/Schedule : **F3XA**

Transaction ID :

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NORPAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		455323.41
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	522801.47									
(c) Total Receipts (from Line 19)	44320.02	187154.31								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	567121.49	642477.72								
7. Total Disbursements (from Line 31)	35528.69	110884.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	531592.80	531592.80								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
NORPAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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		
(i) Itemized (use Schedule A)	40288.90	139256.50
(ii) Unitemized	1775.00	42541.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42063.90	181797.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	42063.90	181797.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	2043.30	2499.23
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	212.82	2857.58
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	44320.02	187154.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	44320.02	187154.31

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	12.30
(b) Other Federal Operating Expenditures.....	16553.69	48917.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16553.69	48929.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18975.00	57955.00
24. Independent Expenditure (use Schedule E)	0.00	2000.00
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35528.69	110884.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35528.69	110872.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	42063.90	181797.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42063.90	181797.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16553.69	48917.62
37. Offsets to Operating Expenditures (from Line 15, page 3)	2043.30	2499.23
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14510.39	46418.39

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

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

FOR LINE NUMBER: PAGE 7 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 130 Dwight Pl.

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 04 / 26 / 2009

Transaction ID: SA11AI.24730

Amount of Each Receipt this Period 350.00

earmark-blanche lincoln

B. Full Name (Last, First, Middle Initial)
Rosalind Baruch

Mailing Address 130 dwight pl

City englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 26 / 2009

Transaction ID: SA11AI.24738

Amount of Each Receipt this Period 350.00

earmark-blanche lincoln

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

Mailing Address 10 Bellcourt Pl

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. C

Name of Employer Olender-Feldman LLP Occupation accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 30 / 2009

Transaction ID: SA11AI.24763

Amount of Each Receipt this Period 275.00

mission

SUBTOTAL of Receipts This Page (optional) 975.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 35
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

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

Mailing Address 139 Huguenot Ave.

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.24718

Amount of Each Receipt this Period 300.00

mission

B.

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

Mailing Address 245 Hutchinson Rd.

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.24768

Amount of Each Receipt this Period 1000.00

earmark-blanche lincoln

C.

Full Name (Last, First, Middle Initial)
Reuven Escott

Mailing Address 55 Regent St.

City Bergenfield State NJ Zip Code 07621

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Securities Trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.24729

Amount of Each Receipt this Period 500.00

earmark-blanche lincoln

SUBTOTAL of Receipts This Page (optional) 1800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Reuven Escott

Mailing Address 55 Regent St.

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Self Occupation Securities Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1625.00

Date of Receipt 04 / 29 / 2009

Transaction ID: SA11AI.24833

Amount of Each Receipt this Period 500.00

mission bus sponsor

B. Full Name (Last, First, Middle Initial)
michael feldstein

Mailing Address 33 hageman ln

City princeton State NJ Zip Code 08540

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

Name of Employer Business Occupation Self

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 07 / 2009

Transaction ID: SA11AI.24679

Amount of Each Receipt this Period 500.00

membership

C. Full Name (Last, First, Middle Initial)
Cookie Fishel

Mailing Address 348 Jones Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 04 / 26 / 2009

Transaction ID: SA11AI.24731

Amount of Each Receipt this Period 4000.00

earmark-blanche lincoln

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 35
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
David Fishel

Mailing Address 348 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Financier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 04 / 26 / 2009

Transaction ID: SA11AI.24732

Amount of Each Receipt this Period 4000.00

earmark-blanche lincoln

B.

Full Name (Last, First, Middle Initial)
David Fishel

Mailing Address 348 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Financier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5397.90

Date of Receipt 04 / 28 / 2009

Transaction ID: SA11AI.24799

Amount of Each Receipt this Period 897.90

In-kind - main event cate-
rers

C.

Full Name (Last, First, Middle Initial)
Mort Fridman

Mailing Address 826 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Self Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3875.00

Date of Receipt 04 / 07 / 2009

Transaction ID: SA11AI.24681

Amount of Each Receipt this Period 1800.00

mission

SUBTOTAL of Receipts This Page (optional) ► 6697.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 35
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Mort Fridman

Mailing Address 826 Winthrop Rd

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4375.00

Date of Receipt: 04 / 28 / 2009
Transaction ID: SA11AI.24737
Amount of Each Receipt this Period: 500.00
earmark-blanche lincoln

B.

Full Name (Last, First, Middle Initial)
Allen Friedman

Mailing Address 315 Johnson Avenue

City State Zip Code
Teaneck NJ 07666

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

Name of Employer J.P. Morgan Chase Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2525.00

Date of Receipt: 04 / 26 / 2009
Transaction ID: SA11AI.24733
Amount of Each Receipt this Period: 1000.00
earmark-blanche lincoln

C.

Full Name (Last, First, Middle Initial)
Jerald Friedman

Mailing Address 1626 Buckingham Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation Oral surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 24 / 2009
Transaction ID: SA11AI.24727
Amount of Each Receipt this Period: 500.00
earmark-steve rothman

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

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

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Anne Gontownik	Date of Receipt MM / DD / YYYY 04 / 26 / 2009
	Mailing Address 250 Mountain Rd.	Transaction ID: SA11AI.24734
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	earmark-blanche lincoln
	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 ▼ 775.00	

B.	Full Name (Last, First, Middle Initial) Robert M. Gottesman	Date of Receipt MM / DD / YYYY 04 / 26 / 2009
	Mailing Address 285 Sunset Avenue	Transaction ID: SA11AI.24735
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	earmark-blanche lincoln
	Name of Employer Self Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00	

C.	Full Name (Last, First, Middle Initial) Michael Gottlieb	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 607 Maitland Avenue	Transaction ID: SA11AI.24766
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	mission
	Name of Employer Grubb & Ellis Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional)	1175.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Andrew Herenstein
 Mailing Address 3 Dogwood Lane
 City State Zip Code
Lawrence NY 11559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Quadrangle Managing Principal
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00
 Date of Receipt: 04 / 29 / 2009
Transaction ID: SA11AI.24760
 Amount of Each Receipt this Period: 425.00
 mission

B. Full Name (Last, First, Middle Initial)
Gary Hoffman
 Mailing Address 529 Rutland Avenue
 City State Zip Code
Teaneck NJ 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
self tax accountant
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt: 04 / 29 / 2009
Transaction ID: SA11AI.24769
 Amount of Each Receipt this Period: 300.00
 mission

C. Full Name (Last, First, Middle Initial)
Elaine Jacobs
 Mailing Address 480 Cumberland Road
 City State Zip Code
Englewood NJ 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
n/a Homemaker
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt: 04 / 26 / 2009
Transaction ID: SA11AI.24736
 Amount of Each Receipt this Period: 250.00
 earmark-blanche lincoln

SUBTOTAL of Receipts This Page (optional) ► 975.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 35
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Mordecai Katz

Mailing Address 300 E. Linden Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 26 / 2009

Transaction ID: SA11AI.24714

Amount of Each Receipt this Period 5000.00

membership

B.

Full Name (Last, First, Middle Initial)
Jonathan Kolatch

Mailing Address 115 Dwight Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 16 / 2009

Transaction ID: SA11AI.24686

Amount of Each Receipt this Period 5000.00

membership

C.

Full Name (Last, First, Middle Initial)
Mindy Kolatch

Mailing Address 115 Dwight Pl

City Englewood State NJ Zip Code 07631

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

Name of Employer Ramaz Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 16 / 2009

Transaction ID: SA11AI.24690

Amount of Each Receipt this Period 2500.00

membership

SUBTOTAL of Receipts This Page (optional) ► 12500.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9800.00

Date of Receipt 04 / 17 / 2009

Transaction ID: SA11AI.25738

Amount of Each Receipt this Period 2500.00

earmark-arlen specter

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

Mailing Address 2 Chestnut Hill Rd

City Manalapan State NJ Zip Code 07726

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

Name of Employer Levin,Shea,Pfeffer & Topas, PA Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 01 / 2009

Transaction ID: SA11AI.24675

Amount of Each Receipt this Period 1000.00

membership

C. Full Name (Last, First, Middle Initial)
Jerry Lewkowitz

Mailing Address 140 N. Woodland Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer People Care, Inc. Occupation Health care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 16 / 2009

Transaction ID: SA11AI.24721

Amount of Each Receipt this Period 1000.00

earmark-arlen specter

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

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

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Gilad Ottensoser		Date of Receipt
	Mailing Address 285 Robin Rd		<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.24749
Name of Employer Deutsche Bank Securities Inc.		Occupation Managing Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="475.00"/>
			mission

B.	Full Name (Last, First, Middle Initial) Rachel Quint		Date of Receipt
	Mailing Address 4515 Greystone		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fieldstone	NY	10471
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.24756
Name of Employer n/a		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="425.00"/>
			mission

C.	Full Name (Last, First, Middle Initial) mark rosalmisky		Date of Receipt
	Mailing Address 1217 trafalgr st		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	teaneck	NJ	07666
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.24696
Name of Employer Bank of America		Occupation Financial Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
			mission

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1200.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<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)
NORPAC

A.	Full Name (Last, First, Middle Initial) David Schlussek	Date of Receipt MM / DD / YYYY 04 / 07 / 2009
	Mailing Address 153 Fort Lee Road	Transaction ID: SA11AI.24726
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	earmark-steve rothman
	Name of Employer Key Properties Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

B.	Full Name (Last, First, Middle Initial) Norman Sohn	Date of Receipt MM / DD / YYYY 04 / 08 / 2009
	Mailing Address 197 Maple St.	Transaction ID: SA11AI.24685
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 675.00
	FEC ID number of contributing federal political committee. C	mission
	Name of Employer Somerset Surgical Occupation Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

C.	Full Name (Last, First, Middle Initial) Steven Spira	Date of Receipt MM / DD / YYYY 04 / 27 / 2009
	Mailing Address 277 West End Ave.	Transaction ID: SA11AI.24716
	City State Zip Code New York NY 10023	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	mission
	Name of Employer Best Efforts Used to Determine Occupation Best Efforts Used to Determine	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	1525.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Martin Stein

Mailing Address 507 Maitland Ave.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Parker Duryee Rosoff & Haft Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.24717

Amount of Each Receipt this Period
350.00

mission

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

Mailing Address 70-30 137 St.

City State Zip Code
Flushing NY 11367

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

Name of Employer Occupation
self Mortgage Broker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.24698

Amount of Each Receipt this Period
125.00

mission

C. Full Name (Last, First, Middle Initial)
Abigail Tambor

Mailing Address 115 86 St

City State Zip Code
New York NY 11028

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

Name of Employer Occupation
none homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.24723

Amount of Each Receipt this Period
1000.00

earmark-arlen specter

SUBTOTAL of Receipts This Page (optional) ► 1475.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Jeffrey Weinstein
Mailing Address 11 Anthony Ave.
City Edison State NJ Zip Code 08820
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1016.60
Date of Receipt 04 / 23 / 2009
Transaction ID: SA11AI.24707
Amount of Each Receipt this Period 100.00
In-kind - fax blast

B. Full Name (Last, First, Middle Initial)
Jeffrey Weinstein
Mailing Address 11 Anthony Ave.
City Edison State NJ Zip Code 08820
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1057.60
Date of Receipt 04 / 23 / 2009
Transaction ID: SA11AI.24709
Amount of Each Receipt this Period 41.00
In-kind - know who

C. Full Name (Last, First, Middle Initial)
anita zaret
Mailing Address 21 poplar plain rd.
City westport State CT Zip Code 06880
FEC ID number of contributing federal political committee. **C**
Name of Employer Morton Haves Occupation Real Estate Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt 04 / 16 / 2009
Transaction ID: SA11AI.24691
Amount of Each Receipt this Period 325.00
mission

SUBTOTAL of Receipts This Page (optional) ▶ 466.00
TOTAL This Period (last page this line number only) ▶ 40288.90

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 35
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Mindy Berman		Date of Receipt
	Mailing Address 312 Cedar Ave		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Highland Park	NJ	08904
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NORPAC		Occupation Assistant	Transaction ID: SA15.24813
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="328.41"/>
		<input type="text" value="328.41"/>	paychex error-payroll

B.	Full Name (Last, First, Middle Initial) Paychex		Date of Receipt
	Mailing Address 1551 S. Washington Ave.		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Piscataway	NJ	08854
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA15.24783
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="446.33"/>
		<input type="text" value="884.94"/>	refund-taxes miswithdrawn

C.	Full Name (Last, First, Middle Initial) Paychex		Date of Receipt
	Mailing Address 1551 S. Washington Ave.		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Piscataway	NJ	08854
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA15.24784
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="59.89"/>
		<input type="text" value="944.83"/>	refund-taxes miswithdrawn

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="834.63"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 35	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial) Karen Pichkhadze		Date of Receipt																					
Mailing Address 1038 Kingsland Lane		<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>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	5		2	0	0	9														
City	State	Zip Code	Transaction ID: SA15.24812																				
Fort Lee	NJ	07024	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1208.67"/>																				
Name of Employer NORPAC	Occupation Membership Director																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1219.84"/>																						
		paychex error-payroll																					

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1208.67"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2043.30"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Fidelity Investments		Date of Receipt
	Mailing Address 396 Route 17 North		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Paramus	NJ	07652
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.24801 Amount of Each Receipt this Period <input type="text" value="203.25"/> dividends
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1115.65"/>	

B.	Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt
	Mailing Address 1445 Valley Rd		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wayne	NJ	07470
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.24802 Amount of Each Receipt this Period <input type="text" value="9.57"/> interest
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1741.93"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="212.82"/>
TOTAL This Period (last page this line number only)	<input type="text" value="212.82"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Atmosphere Inc	Transaction ID: SB21B.24788 Date of Disbursement																			
	Mailing Address 2715 Pittman Drive	<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>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	0		2	0	0	9												
	City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period																			
	Purpose of Disbursement lighting for mission Candidate Name	<table border="1"><tr><td>970.00</td></tr></table>	970.00																		
970.00																					
	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) ▼																			
		001 Category/Type																			

B.	Full Name (Last, First, Middle Initial) Mindy Berman	Transaction ID: SB21B.24775 Date of Disbursement																			
	Mailing Address 312 Cedar Ave	<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>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	0		2	0	0	9												
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period																			
	Purpose of Disbursement payroll Candidate Name	<table border="1"><tr><td>328.41</td></tr></table>	328.41																		
328.41																					
	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) ▼																			
		001 Category/Type																			

C.	Full Name (Last, First, Middle Initial) Mindy Berman	Transaction ID: SB21B.24779 Date of Disbursement																			
	Mailing Address 312 Cedar Ave	<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>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	3		2	0	0	9												
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period																			
	Purpose of Disbursement payroll Candidate Name	<table border="1"><tr><td>328.41</td></tr></table>	328.41																		
328.41																					
	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) ▼																			
		001 Category/Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1626.82</td></tr></table>	1626.82
1626.82		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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 24 / 35

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Mindy Berman Mailing Address 312 Cedar Ave City Highland Park State NJ Zip Code 08904 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24792 Date of Disbursement 04 / 27 / 2009 Amount of Each Disbursement this Period 127.86 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Event Emissary LLC Mailing Address P. O. Box575 City Washington State DC Zip Code 20044-0575 Purpose of Disbursement site fee for mission Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24787 Date of Disbursement 04 / 20 / 2009 Amount of Each Disbursement this Period 4400.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) David Fishel Mailing Address 348 Jones Rd. City Englewood State NJ Zip Code 07631 Purpose of Disbursement In-kind - main event caterers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24800 Date of Disbursement 04 / 28 / 2009 Amount of Each Disbursement this Period 897.90 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5425.76

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Karen Futter <hr/> Mailing Address 720 Downing St. <hr/> City Teaneck State NJ Zip Code 07666 <hr/> Purpose of Disbursement mission refund Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24828 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 275.00
B.	Full Name (Last, First, Middle Initial) main event caterers <hr/> Mailing Address 38 West Forest Ave. <hr/> City Englewood State NJ Zip Code 07631 <hr/> Purpose of Disbursement lincoln event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24744 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 897.90
C.	Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 1551 S. Washington Ave. <hr/> City Piscataway State NJ Zip Code 08854 <hr/> Purpose of Disbursement taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24773 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 670.68

SUBTOTAL of Disbursements This Page (optional) ► 1843.58

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement invoice</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24777</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="415.40"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24778</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="506.22"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24781</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="506.22"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1427.84"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex Mailing Address 1551 S. Washington Ave. City Piscataway State NJ Zip Code 08854 Purpose of Disbursement taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24795 Date of Disbursement 04 / 27 / 2009	Amount of Each Disbursement this Period 420.60
B.	Full Name (Last, First, Middle Initial) paypal Mailing Address PO Box 45950 City Omaha State NE Zip Code 68145 Purpose of Disbursement paypal fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24816 Date of Disbursement 04 / 30 / 2009	Amount of Each Disbursement this Period 115.60
C.	Full Name (Last, First, Middle Initial) Karen Pichkhadze Mailing Address 1038 Kingsland Lane City Fort Lee State NJ Zip Code 07024 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.24776 Date of Disbursement 04 / 10 / 2009	Amount of Each Disbursement this Period 1208.67

SUBTOTAL of Disbursements This Page (optional) ▶

1744.87

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Karen Pichkhadze	Transaction ID: SB21B.24780 Date of Disbursement 04 / 13 / 2009
	Mailing Address 1038 Kingsland Lane	Amount of Each Disbursement this Period 1208.67
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement payroll-mistake Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Karen Pichkhadze	Transaction ID: SB21B.24793 Date of Disbursement 04 / 27 / 2009
	Mailing Address 1038 Kingsland Lane	Amount of Each Disbursement this Period 1122.72
	City Fort Lee State NJ Zip Code 07024	
	Purpose of Disbursement payroll Candidate Name	Category/Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.24786 Date of Disbursement 04 / 16 / 2009
	Mailing Address 1445 Valley Rd	Amount of Each Disbursement this Period 384.02
	City Wayne State NJ Zip Code 07470	
	Purpose of Disbursement staples, ups, walgreens Candidate Name	Category/Type 001
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	2715.41
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Valley National Bank</p> <p>Mailing Address 1445 Valley Rd</p> <p>City Wayne State NJ Zip Code 07470</p> <p>Purpose of Disbursement merchant fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24804</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="482.03"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jeffrey Weinstein</p> <p>Mailing Address 11 Anthony Ave.</p> <p>City Edison State NJ Zip Code 08820</p> <p>Purpose of Disbursement In-kind - fax blast</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24708</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jeffrey Weinstein</p> <p>Mailing Address 11 Anthony Ave.</p> <p>City Edison State NJ Zip Code 08820</p> <p>Purpose of Disbursement In-kind - know who</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.24710</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="41.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="623.03"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Jeffrey Weinstein	Transaction ID: SB21B.24825 Date of Disbursement 04 / 29 / 2009
	Mailing Address 11 Anthony Ave.	Amount of Each Disbursement this Period 125.00
	City Edison State NJ Zip Code 08820	
	Purpose of Disbursement mission refund Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jeffrey Weinstein	Transaction ID: SB21B.24826 Date of Disbursement 04 / 29 / 2009
	Mailing Address 11 Anthony Ave.	Amount of Each Disbursement this Period 250.00
	City Edison State NJ Zip Code 08820	
	Purpose of Disbursement mission refund 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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	375.00
TOTAL This Period (last page this line number only)	▶	15782.31

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR ARLEN SPECTER	Transaction ID: SB23.24524 Date of Disbursement 04 / 01 / 2009
	Mailing Address 426 C STREET NE CARRIAGE HOUSE	Amount of Each Disbursement this Period 500.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement earmark-RObert goodman	
	Candidate Name CITIZENS FOR ARLEN SPECTER	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: SB23.24724 Date of Disbursement 04 / 13 / 2009
	Mailing Address 111 South 15th ST	Amount of Each Disbursement this Period 1000.00
	City Philadelphia State PA Zip Code 19102	
	Purpose of Disbursement earmark-abigail tambor	
	Candidate Name CITIZENS FOR ARLEN SPECTER	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: SB23.24722 Date of Disbursement 04 / 16 / 2009
	Mailing Address 111 South 15th ST	Amount of Each Disbursement this Period 1000.00
	City Philadelphia State PA Zip Code 19102	
	Purpose of Disbursement earmark-jerry lewkowitz	
	Candidate Name CITIZENS FOR ARLEN SPECTER	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Citizens for Arlen Specter <hr/> Mailing Address 111 South 15th ST <hr/> City Philadelphia State PA Zip Code 19102 <hr/> Purpose of Disbursement earmark-leon kozak Candidate Name CITIZENS FOR ARLEN SPECTER <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24725 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
B. Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE RECOUNT FUND <hr/> Mailing Address 680 Transfer Road, Suite A <hr/> City Saint Paul State MN Zip Code 55114 <hr/> Purpose of Disbursement earmark-robot goodman Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24844 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
C. Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE RECOUNT FUND <hr/> Mailing Address 680 Transfer Road, Suite A <hr/> City Saint Paul State MN Zip Code 55114 <hr/> Purpose of Disbursement earmark-stanley scher Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24845 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 25.00

SUBTOTAL of Disbursements This Page (optional) ▶

3525.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: SB23.24797 Date of Disbursement
	Mailing Address 303 massachusetts ave 3rd fl	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement earmarked donations Candidate Name	<input type="text" value="11450.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02	Category/Type <input type="text" value="011"/>
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) STEVE ROTHMAN FOR CONGRESS	Transaction ID: SB23.25739 Date of Disbursement
	Mailing Address Post Office Box 714	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Hackensack State NJ Zip Code 07602	Amount of Each Disbursement this Period
	Purpose of Disbursement earmark-david schlussel Candidate Name STEVE ROTHMAN FOR CONGRESS	<input type="text" value="500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 09	Category/Type <input type="text"/>
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Steve Rothman for Congress	Transaction ID: SB23.24728 Date of Disbursement
	Mailing Address PO Box 714	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Hackensack State NJ Zip Code 07602	Amount of Each Disbursement this Period
	Purpose of Disbursement earmark-jerry friedman Candidate Name Steve Rothman for Congress	<input type="text" value="500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 09	Category/Type <input type="text"/>
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SB23**
Transaction ID : **SB23.24797**

This contribution was made by the following donors: David Fishel \$4,000; Cookie Fishel \$4,000; Howard Baruch \$350; Rosalind Baruch \$350; Anne Gontownik \$500; Robert Gottesman \$500; Reuven Escott \$500; Elaine Jacobs \$250; Allen Friedman \$1,000.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Steve Rothman for Congress	Transaction ID: SB23.24746 Date of Disbursement
	Mailing Address PO Box 714	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Hackensack State NJ Zip Code 07602	Amount of Each Disbursement this Period
	Purpose of Disbursement norpac donation	<input type="text" value="500.00"/>
	Candidate Name Steve Rothman for Congress	<input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	State: NY District: 09	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="18975.00"/>