

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DONALD NORCROSS FOR CONGRESS

ADDRESS (number and street)

PO BOX 160

Check if different than previously reported. (ACC)

COLLINGSWOOD

NJ

08108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00558320

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

NJ

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2015

through

M M / D D / Y Y Y Y
12 / 31 / 2015

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 Melissa D Pollitt

Signature of Treasurer Melissa D Pollitt

[Electronically Filed]

Date

M M / D D / Y Y Y Y
05 / 25 / 2016

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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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

DONALD NORCROSS FOR 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))....	105652.00	775755.50
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	105652.00	775755.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	42318.48	422533.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	56.00	831.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	42262.48	421702.60
8. Cash on Hand at Close of Reporting Period (from Line 27).....	319195.68	
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).....	15161.83	

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 12/2003)

Write or Type Committee Name

DONALD NORCROSS FOR 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).....	26127.00	388175.50
(ii) Unitemized.....	1025.00	9580.00
(iii) TOTAL of contributions from individuals ▶	27152.00	397755.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	78500.00	378000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	105652.00	775755.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	15161.83
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	15161.83
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	56.00	831.36
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	159.30	195.18
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	105867.30	791943.87

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	42318.48	422533.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	150000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	150000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	1200.00	1200.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	43518.48	573733.96

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	256846.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	105867.30
25. SUBTOTAL (add Line 23 and Line 24).....	362714.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	43518.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	319195.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ray Akers

Mailing Address 201 Grove Rd

City State Zip Code
Thorofare NJ 08086

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

Name of Employer Occupation
Akers Biosciences Chairman

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
11 / 17 / 2015

Transaction ID : SA11AI.9443

Amount of Each Receipt this Period
1000.00

Memo Item
Earmarked Contribution

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
26285.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2015

Transaction ID : SA11AI.9443.0

Amount of Each Receipt this Period
1000.00

Memo Item
Conduit Contribution

C. Full Name (Last, First, Middle Initial)
Robert Allison

Mailing Address 2009 Main St

City State Zip Code
Lake Como NJ 07719

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

Name of Employer Occupation
Holman & Frenia, PC CPA / Vice President

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
11 / 19 / 2015

Transaction ID : SA11AI.9477

Amount of Each Receipt this Period
500.00

Memo Item

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert M Benedon

Mailing Address 24 Liberty Ln

City State Zip Code
Cherry Hill NJ 08002

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

Name of Employer Self Occupation Dentist

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
12 / 31 / 2015

Transaction ID : SA11AI.9501

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
George W Blank

Mailing Address 148A Old York Rd

City State Zip Code
New Hope PA 18938

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11AI.9469

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Thomas Blatner

Mailing Address 768 River Rd

City State Zip Code
Ewing NJ 08628

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

Name of Employer Blatner Associates, Inc. Occupation President

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
10 / 18 / 2015

Transaction ID : SA11AI.9447

Amount of Each Receipt this Period
300.00

Memo Item
Earmarked Contribution

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
25185.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2015

Transaction ID : SA11AI.9447.0

Amount of Each Receipt this Period
300.00

Memo Item
Conduit Contribution

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

Mailing Address 1802 Country Club Rd

City Cherry Hill State NJ Zip Code 08003

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

Name of Employer Occupation
Bross Frankel Attorney

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
12 / 31 / 2015

Transaction ID : SA11AI.9448

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Robert Capoferri

Mailing Address 2561 Aqua Vista Blvd

City Fort Lauderdale State FL Zip Code 33301

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

Name of Employer Occupation
Asphalt Paving Systems, Inc. President

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
11 / 16 / 2015

Transaction ID : SA11AI.9485

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rakesh R Darji

Mailing Address 27 Banbury Rd

City Lumberton State NJ Zip Code 08048

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

Name of Employer Environmental Resolutions, Inc Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.9462

Amount of Each Receipt this Period
125.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Halley S Faust

Mailing Address 1260 Vallecita Dr

City Sante Fe State NM Zip Code 87501

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

Name of Employer Jerome Capital LLC Occupation Venture Capital

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
 12 / 29 / 2015

Transaction ID : SA11AI.9471

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 106 Woodlawn Ave

City Merchantville State NJ Zip Code 08109

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

Name of Employer Environmental Resolutions, Inc Occupation Planner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.9458

Amount of Each Receipt this Period
225.00

Memo Item

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kevin Frenia		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 19 / 2015	
Mailing Address 618 Stokes Rd		Transaction ID : SA11AI.9475	
City Medford	State NJ	Zip Code 08055	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Holman & Frenia, PC	Occupation CPA / Vice President		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Joel Friedlander		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2015	
Mailing Address 5624 Kennett Pike		Transaction ID : SA11AI.9467	
City Wilmington	State DE	Zip Code 19807	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Friedlander & Gorris, PA	Occupation Attorney		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 08 / 2015	
Mailing Address P.O. BOX 441146		Transaction ID : SA11AI.9467.0	
City SOMERVILLE	State MA	Zip Code 02144	
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 1500.00	
Name of Employer	Occupation		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 27785.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jack Halpern		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 160 W 66th St Apt 51A		Transaction ID : SA11AI.9473
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Halpern Enterprises	Occupation Developer	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. Michael Herson		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2015
Mailing Address 8709 Burning Tree Rd		Transaction ID : SA11AI.9446
City Bethesda	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer American Defense International	Occupation Govt Affairs Consultant	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	Earmarked Contribution

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2015
Mailing Address P.O. BOX 441146		Transaction ID : SA11AI.9446.0
City SOMERVILLE	State MA	
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 28285.00	Conduit Contribution

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Beth Hinsdale

Mailing Address 23057 Erwin St

City Woodland Hills State CA Zip Code 91367

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

Name of Employer Wilentz Goldman Spitzer Occupation Attorney

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
 12 / 31 / 2015

Transaction ID : SA11AI.9508

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Joseph Hirsh

Mailing Address 24 Horseshoe Dr

City Mount Laurel State NJ Zip Code 08054

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

Name of Employer Environmental Resolutions, Inc Occupation Engineer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA11AI.9460

Amount of Each Receipt this Period
125.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Ron Jaworski

Mailing Address 16 Brookwood Dr

City Medford State NJ Zip Code 08055

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

Name of Employer ESPN Occupation Pro Football Anaylst

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.9503

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

2125.00

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

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

FOR LINE NUMBER: PAGE 12 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ian Joffe

Mailing Address 131 Renaissance Dr

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Occupation
Physician Lourdes Cardiology

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
 12 / 28 / 2015

Transaction ID : SA11AI.9479

Amount of Each Receipt this Period
500.00

Memo Item
Earmarked Contribution

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
28885.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.9479.0

Amount of Each Receipt this Period
500.00

Memo Item
Conduit Contribution

C. Full Name (Last, First, Middle Initial)
William H Kirchner

Mailing Address 444 Pricketts Mill Rd

City State Zip Code
Tabernacle NJ 08088

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

Name of Employer Occupation
Environmental Resolutions, Inc Engineer

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
 12 / 14 / 2015

Transaction ID : SA11AI.9463

Amount of Each Receipt this Period
250.00

Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 13 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

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

Mailing Address 2 Chestnut Hill Dr

City Manalapan State NJ Zip Code 07726

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

Name of Employer Levin Shea & Pfeffer Occupation Attorney

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
12 / 31 / 2015

Transaction ID : SA11AI.9488

Amount of Each Receipt this Period
500.00

Memo Item
Earmarked Contribution

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
29837.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11AI.9488.0

Amount of Each Receipt this Period
500.00

Memo Item
Conduit Contribution

C. Full Name (Last, First, Middle Initial)
Nathan J Lindenbaum

Mailing Address 464 Winthrop Rd

City Teaneck State NJ Zip Code 07666

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

Name of Employer Propane Power Corp 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
12 / 31 / 2015

Transaction ID : SA11AI.9496

Amount of Each Receipt this Period
1000.00

Memo Item
Earmarked Contribution

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
30837.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 31 2015

Transaction ID : SA11AI.9496.0

Amount of Each Receipt this Period
1000.00

Memo Item
Conduit Contribution

B. Full Name (Last, First, Middle Initial)
Ira M Lubert

Mailing Address 2929 Arch St
13th Fl

City State Zip Code
Philadelphia PA 19104

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

Name of Employer Occupation
Lubert Adler Real Estate

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
 11 12 2015

Transaction ID : SA11AI.9490

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
James Greg Means

Mailing Address 2451 N Taylor St

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Alpine Group Founder / Lobbyist

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
 12 21 2015

Transaction ID : SA11AI.9481

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

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

Mailing Address 9014 Marseille Dr

City Potomac State MD Zip Code 20854

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

Name of Employer Winning Strategies Washington Occupation Partner

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
 12 / 21 / 2015

Transaction ID : SA11AI.9511

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 9014 Marseille Dr

City Potomac State MD Zip Code 20854

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

Name of Employer Winning Strategies Washington Occupation Partner

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.9512

Amount of Each Receipt this Period
 400.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Natalie Milstein

Mailing Address 16027 Ventura Blvd

City Encino State CA Zip Code 91436

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

Name of Employer Self Occupation Property Management

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
 10 / 20 / 2015

Transaction ID : SA11AI.9494

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 16 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher Noll

Mailing Address 101 Willow Way Place

City State Zip Code
Cherry Hill NJ 08034

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

Name of Employer Occupation
Environmental Resolutions, Inc Engineer

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
 12 / 14 / 2015

Transaction ID : SA11AI.9459

Amount of Each Receipt this Period
 600.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robert B Pincus

Mailing Address 108 Rockford Grove Ln

City State Zip Code
Wilmington DE 19806

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

Name of Employer Occupation
Skadden Arps Attorney

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
 12 / 31 / 2015

Transaction ID : SA11AI.9504

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 1527 Hillside Dr

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Occupation
CCMUA Accountant

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
 11 / 02 / 2015

Transaction ID : SA11AI.9454

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 17 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard Saferstein

Mailing Address 20 Forrest Ct

City State Zip Code
Mt Laurel NJ 08054

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

Name of Employer Occupation
Self Forensic Science Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11AI.9500

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Marvin O Schlanger

Mailing Address 15 Southwood Dr

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Occupation
N/A Retired

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
 10 / 20 / 2015

Transaction ID : SA11AI.9492

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Douglas S Stanger

Mailing Address 4 Joseph Ct

City State Zip Code
Northfield NJ 08225

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

Name of Employer Occupation
Flaster Greenberg Attorney

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
 12 / 31 / 2015

Transaction ID : SA11AI.9465

Amount of Each Receipt this Period
 500.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 56
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Roy H Tanzman

Mailing Address 4 Talia Rd

City Kendall Pk State NJ Zip Code 08824

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

Name of Employer Wilentz Goldman Spitzer PA Occupation Attorney

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
 12 / 31 / 2015

Transaction ID : SA11AI.9510

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Tonio Burgos & Assoc of NJ LLC

Mailing Address 115 Broadway Suite 1504

City New York State NY Zip Code 10006

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

Name of Employer Occupation

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
 10 / 23 / 2015

Transaction ID : SA11AI.9514

Amount of Each Receipt this Period
1500.00

Memo Item
 Partnership Contribution

C. Full Name (Last, First, Middle Initial)
Tonio Burgos

Mailing Address 200 West State St

City Trenton State NJ Zip Code 08608

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

Name of Employer Tonio Burgos & Assoc of NJ LLC Occupation CEO

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
 01 / 23 / 2015

Transaction ID : SA11AI.9514.0

Amount of Each Receipt this Period
1500.00

Memo Item
 Partner Share

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 56			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
	12	13a	13b	14	15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bruce Tretheway

Mailing Address 421 Cherry Hill Blvd

City State Zip Code
Cherry Hill NJ 08002

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

Name of Employer Occupation
State of NJ Family Service Specialist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
252.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.9450

Amount of Each Receipt this Period
252.00

Memo Item
Earmarked Contribution

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
29137.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.9450.0

Amount of Each Receipt this Period
252.00

Memo Item
Conduit Contribution

C. Full Name (Last, First, Middle Initial)
Jason R Whitney

Mailing Address 11 Furlong Dr

City State Zip Code
Cherry Hill NJ 08003

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

Name of Employer Occupation
AlphaImpactRx Market Research

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
10 20 2015

Transaction ID : SA11AI.9483

Amount of Each Receipt this Period
250.00

Memo Item

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

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

502.00

26127.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. AIR LINE PILOTS ASSOCIATION PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 MASSACHUSETTS AVE. NW
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00035451
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015
Transaction ID : SA11C.9530
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. AMALGAMATED TRANSIT UNION - COPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5025 WISCONSIN AVE NW
 City WASHINGTON State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C** C00032995
 Name of Employer Occupation
 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
 10 / 28 / 2015
Transaction ID : SA11C.9537
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 CONNECTICUT AVENUE NW
 SUITE 600
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00004275
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : SA11C.9543
 Amount of Each Receipt this Period
 3000.00
 Memo Item

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

6500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 21 2015

Transaction ID : SA11C.9534

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)

Mailing Address 1111 NORTH FAIRFAX ST.

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 02 2015

Transaction ID : SA11C.9583

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ANALYTICAL GRAPHICS INC PAC (AGI PAC)

Mailing Address 220 VALLEY CREEK BLVD.

City State Zip Code
EXTON PA 19341

FEC ID number of contributing federal political committee. **C C00370023**

Name of Employer Occupation

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
12 16 2015

Transaction ID : SA11C.9531

Amount of Each Receipt this Period
500.00

Memo Item

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. AKARD STREET
SUITE 2701

City DALLAS State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2015

Transaction ID : SA11C.9536

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AXEON SPECIALTY PRODUCTS LLC PAC

Mailing Address 4 PARADISE RD

City PAULSBORO State NJ Zip Code 08066

FEC ID number of contributing federal political committee. **C** C00551960

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11C.9538

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

Mailing Address 101 CONSTITUTION AVENUE, NW
10TH FLOOR WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2015

Transaction ID : SA11C.9544

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

8000.00

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

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

FOR LINE NUMBER: PAGE 23 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial)
CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

A. Mailing Address 101 CONSTITUTION AVENUE, NW
10TH FLOOR WEST
City WASHINGTON State DC Zip Code 20001

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 16 / 2015

Transaction ID : SA11C.9545

FEC ID number of contributing federal political committee. **C** C00001016

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Memo Item

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
10000.00

Full Name (Last, First, Middle Initial)
B. CHICAGO BRIDGE & IRON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1050 K STREET, NW
SUITE 620
City WASHINGTON State DC Zip Code 20001

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2015

Transaction ID : SA11C.9546

FEC ID number of contributing federal political committee. **C** C00104885

Amount of Each Receipt this Period
1500.00

Name of Employer Occupation

Memo Item

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
1500.00

Full Name (Last, First, Middle Initial)
C. COLUMBIA PIPELINE GROUP, INC. PAC

Mailing Address 10 G STREET NE
SUITE 400
City WASHINGTON State DC Zip Code 20002

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11C.9580

FEC ID number of contributing federal political committee. **C** C00575340

Amount of Each Receipt this Period
1500.00

Name of Employer Occupation

Memo Item

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
1500.00

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

8000.00

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 24 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2015

Transaction ID : SA11C.9548

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

Mailing Address 100 INDIANA AVE., N. W.

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 30 2015

Transaction ID : SA11C.9577

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
COMMITTEE TO STRENGTHEN AMERICA; THE

Mailing Address 356 MORRIS STREET

City State Zip Code
WOODBURY NJ 08096

FEC ID number of contributing federal political committee. **C** C00492165

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 10 2015

Transaction ID : SA11C.9549

Amount of Each Receipt this Period
 2000.00

Memo Item

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

4000.00

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 25 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC; THE

Mailing Address 1455 PENNSYLVANIA AVE., NW
SUITE 725

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

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
12 / 30 / 2015

Transaction ID : SA11C.9554

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DISCOVER FINANCIAL SERVICES POLITICAL ACTION COMMITTEE

Mailing Address 500 8TH STREET NW SUITE 210

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00438051

Name of Employer Occupation

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
11 / 16 / 2015

Transaction ID : SA11C.9550

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA PIPER PAC)

Mailing Address 500 8TH STREET, NW

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2015

Transaction ID : SA11C.9552

Amount of Each Receipt this Period
2000.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION POLITICAL ACTION COMMITTEE (FLUOR PAC)

Mailing Address 6700 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

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
12 / 10 / 2015

Transaction ID : SA11C.9556

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11C.9558

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2015

Transaction ID : SA11C.9559

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 27 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 RHODE ISLAND AVE NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00235853**

Name of Employer Occupation

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
 10 / 30 / 2015

Transaction ID : SA11C.9560

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF HEAT & FROST INSULATORS AND ASBESTOS WORKERS P A C

Mailing Address 9602 MARTIN LUTHER KING HIGHWAY

City State Zip Code
LANHAM MD 20706

FEC ID number of contributing federal political committee. **C C00115527**

Name of Employer Occupation

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
 12 / 30 / 2015

Transaction ID : SA11C.9535

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION

Mailing Address 5000 WEST SIDE AVENUE

City State Zip Code
NORTH BERGEN NJ 07047

FEC ID number of contributing federal political committee. **C C00158576**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11C.9561

Amount of Each Receipt this Period
 3000.00

Memo Item

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 28 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE

Mailing Address **ONE JOHNSON & JOHNSON PLAZA**

City State Zip Code
NEW BRUNSWICK NJ 08933

FEC ID number of contributing federal political committee. **C C00010983**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
11 / 06 / 2015

Transaction ID : SA11C.9562

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
KELLOGG COMPANY BETTER GOVERNMENT COMMITTEE

Mailing Address **ONE KELLOGG SQUARE**

City State Zip Code
BATTLE CREEK MI 49017

FEC ID number of contributing federal political committee. **C C00039552**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
12 / 22 / 2015

Transaction ID : SA11C.9563

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
10 / 20 / 2015

Transaction ID : SA11C.9565

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address **2121 CRYSTAL DRIVE
SUITE 100**

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **8000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 29 2015

Transaction ID : SA11C.9566

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MACANDREWS AND FORBES HOLDINGS INC POLITICAL ACTION COMMITTEE (MAFPAC)

Mailing Address **35 EAST 62ND STREET**

City State Zip Code
NEW YORK NY 10065

FEC ID number of contributing federal political committee. **C C00432856**

Name of Employer Occupation

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
10 30 2015

Transaction ID : SA11C.9569

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MACC-Maryland Assoc for Concerned Citizens PAC

Mailing Address **PO Box 32196**

City State Zip Code
Baltimore MD 21282

FEC ID number of contributing federal political committee. **C C00195024**

Name of Employer Occupation

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
12 31 2015

Transaction ID : SA11C.9570

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3500.00
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 30 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (MCA-PAC)

Mailing Address 1385 PICCARD DRIVE

City State Zip Code
ROCKVILLE MD 20850

FEC ID number of contributing federal political committee. **C** C00343590

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2015

Transaction ID : SA11C.9572

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City State Zip Code
REDMOND WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

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
 11 19 2015

Transaction ID : SA11C.9573

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1919 M STREET, NW
5TH FLOOR

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

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
 12 03 2015

Transaction ID : SA11C.9575

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 56
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11C.9578

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 400

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C C00113241**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2015

Transaction ID : SA11C.9579

Amount of Each Receipt this Period
 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NJ STATE LABORERS PAC/ LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 104 INTERCHANGE PLAZA
SUITE 301

City MONROE TWP. State NJ Zip Code 08831

FEC ID number of contributing federal political committee. **C C00214643**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015

Transaction ID : SA11C.9567

Amount of Each Receipt this Period
 3000.00

Memo Item

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC

Mailing Address 1150 17TH STREET NW
SUITE 702

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00286807**

Name of Employer Occupation

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
 12 / 16 / 2015

Transaction ID : SA11C.9582

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION

Mailing Address 1775 K STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C70003645**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11C.9585

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 10 / 2015

Transaction ID : SA11C.9588

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITE HERE TIP CAMPAIGN COMMITTEE

Mailing Address 275 7TH AVENUE 11TH FLOOR

City NEW YORK State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11C.9586

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
UNITE HERE TIP CAMPAIGN COMMITTEE

Mailing Address 275 7TH AVENUE 11TH FLOOR

City NEW YORK State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C C00004861**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2015

Transaction ID : SA11C.9587

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WAKEFERN FOOD CORP. POLITICAL ACTION COMMITTEE

Mailing Address 33 NORTHFIELD AVENUE

City EDISON State NJ Zip Code 08818

FEC ID number of contributing federal political committee. **C C00489005**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2015

Transaction ID : SA11C.9589

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ZENECA INC. POLITICAL ACTION COMMITTEE

Mailing Address **C/O ZENECA INC.**
1800 CONCORD PIKE, PO BOX 15437

City **WILMINGTON** State **DE** Zip Code **19850**

FEC ID number of contributing federal political committee. **C C00279455**

Name of Employer _____ Occupation _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date **1000.00**

Date of Receipt
 / /
12 / 22 / 2015

Transaction ID : SA11C.9541

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

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

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

1000.00

78500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) DONALD W NORCROSS		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2015	
Mailing Address 1 MARKET STREET UNIT 522		Transaction ID : SA15.9590	
City CAMDEN	State NJ	Zip Code 08102	
FEC ID number of contributing federal political committee. C H4NJ01084		Amount of Each Receipt this Period 86.73	
Name of Employer US Federal Government	Occupation Member, US House of Representatives		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15284.44		
<input type="checkbox"/> Memo Item Reimbursement for Personal Use of Campaign Vehicle			

Full Name (Last, First, Middle Initial) DONALD W NORCROSS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015	
Mailing Address 1 MARKET STREET UNIT 522		Transaction ID : SA15.9591	
City CAMDEN	State NJ	Zip Code 08102	
FEC ID number of contributing federal political committee. C H4NJ01084		Amount of Each Receipt this Period 36.92	
Name of Employer US Federal Government	Occupation Member, US House of Representatives		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15321.36		
<input type="checkbox"/> Memo Item Reimbursement for Personal Use of Campaign Vehicle			

Full Name (Last, First, Middle Initial) DONALD W NORCROSS		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 1 MARKET STREET UNIT 522		Transaction ID : SA15.9592	
City CAMDEN	State NJ	Zip Code 08102	
FEC ID number of contributing federal political committee. C H4NJ01084		Amount of Each Receipt this Period 35.65	
Name of Employer US Federal Government	Occupation Member, US House of Representatives		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15357.01		
<input type="checkbox"/> Memo Item Reimbursement for Personal Use of Campaign Vehicle			

SUBTOTAL of Receipts This Page (optional).....	159.30
TOTAL This Period (last page this line number only).....	159.30

**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 36 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 11.85	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9717	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 3.95	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9718	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 39.50	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9719	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	55.30
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 37 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 59.25
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9721
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 19.75
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9722
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 3.95
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9723
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	82.95
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 38 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 19.75 <input type="checkbox"/> Memo Item Transaction ID : SB17.9724
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 19.75 <input type="checkbox"/> Memo Item Transaction ID : SB17.9725
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 39.50 <input type="checkbox"/> Memo Item Transaction ID : SB17.9726
City Somerville	State MA	Zip Code 02144	
Purpose of Disbursement Processing Fee		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	79.00
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 39 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 9.96	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9727	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 3.95	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9728	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 366 Summer St			Amount of Each Disbursement this Period 3.95	
City Somerville	State MA	Zip Code 02144	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Processing Fee		Category/ Type 003	Transaction ID : SB17.9729	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	17.86
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 40 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 366 Summer St		Amount of Each Disbursement this Period 3.95
City Somerville State MA Zip Code 02144	Purpose of Disbursement Processing Fee 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9730
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 1899.21
City Newark State NJ Zip Code 07101	Purpose of Disbursement Candidate Expenses - Itemized Below Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9691
State: District:		

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2015
Mailing Address 30 Ivy St SE		Amount of Each Disbursement this Period 312.50
City Washington State DC Zip Code 20003	Purpose of Disbursement Meeting / Meals Expenses 001 Category/Type	
Candidate Name		<input checked="" type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9691.3
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1903.16
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 41 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Host		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2015
Mailing Address PO Box 77896		Amount of Each Disbursement this Period 100.75
City Washington	State DC	
Zip Code 20013	Purpose of Disbursement Meeting / Meal Expense	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9691.10
State: District:		

Full Name (Last, First, Middle Initial) B. Prime Rib - K Street		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2015
Mailing Address 2020 K St NW Frnt 3		Amount of Each Disbursement this Period 216.40
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement Meeting / Meal Expense	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9691.12
State: District:		

Full Name (Last, First, Middle Initial) C. US House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address Longworth Bldg		Amount of Each Disbursement this Period 274.70
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement Holiday Gifts Expense	<input checked="" type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.9691.13
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 42 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US House of Representatives Gift Shop			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015	
Mailing Address Longworth Bldg			Amount of Each Disbursement this Period 177.00	
City Washington	State DC	Zip Code 20515	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.9691.14	
Purpose of Disbursement Holiday Gifts Expesne		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Staples			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2015	
Mailing Address 2230 Marlton Pike West			Amount of Each Disbursement this Period 89.62	
City Cherry Hill	State NJ	Zip Code 08002	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17.9691.17	
Purpose of Disbursement Office Supplies		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Angerholzer Broz Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015	
Mailing Address 499 South Capitol St SW Suite 422			Amount of Each Disbursement this Period 4275.00	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item Transaction ID : SB17.9600	
Purpose of Disbursement Consulting Services Expense - Fundraising		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4275.00
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 43 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015
Mailing Address 499 South Capitol St SW Suite 422		Amount of Each Disbursement this Period 4985.90
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting Services Expense - Fundraising 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9629
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 499 South Capitol St SW Suite 422		Amount of Each Disbursement this Period 4448.65
City Washington State DC Zip Code 20003	Purpose of Disbursement Consulting Services Expense - Fundraising 003 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9641
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 41.41
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement Telecommunications Expense 001 Category/Type	
Candidate Name		<input type="checkbox"/> Memo Item
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)	Transaction ID : SB17.9602
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9475.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 236.30 <input type="checkbox"/> Memo Item
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telecommunications Expense	Transaction ID : SB17.9630
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 236.30 <input type="checkbox"/> Memo Item
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telecommunications Expense	Transaction ID : SB17.9661
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Building One America		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015
Mailing Address 900 Haddon Ave Suite 201		Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Memo Item
City Collingswood	State NJ	
Zip Code 08108	Purpose of Disbursement Donation / Sponsor	Transaction ID : SB17.9671
Candidate Name	012 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	822.60
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 45 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Curt Hudson, Photographer		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 6 East Haddon Ave		Amount of Each Disbursement this Period 374.50
City Oaklyn	State NJ	
Zip Code 08107	Purpose of Disbursement Photography Services Expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 007	Transaction ID : SB17.9618
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Erin's Secret Garden		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address 603 Monmouth St		Amount of Each Disbursement this Period 82.30
City Gloucester City	State NJ	
Zip Code 08030	Purpose of Disbursement Floral Expesne	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.9646
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Go Daddy		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015
Mailing Address 14455 North Hayden Rd		Amount of Each Disbursement this Period 92.00
City Scottsdale	State AZ	
Zip Code 85260	Purpose of Disbursement Web / Domain Expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : SB17.9640
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	548.80
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 46 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Listrak		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.17
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
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)	Transaction ID : SB17.9601
State: District:		

Full Name (Last, First, Middle Initial) B. Listrak		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.00
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
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)	Transaction ID : SB17.9662
State: District:		

Full Name (Last, First, Middle Initial) C. Listrak		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015
Mailing Address 529 East Main St		Amount of Each Disbursement this Period 375.41
City Lititz	State PA Zip Code 17543	
Purpose of Disbursement Telecommunications Expense	Candidate Name	<input type="checkbox"/> Memo Item
Category/Type 001		
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)	Transaction ID : SB17.9685
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1125.58
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 47 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NAACP			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015		
Mailing Address PO Box 545			Amount of Each Disbursement this Period 750.00		
City Williamstown	State NJ	Zip Code 08094	<input type="checkbox"/> Memo Item Transaction ID : SB17.9644		
Purpose of Disbursement Donation / Membership		012 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Anthony R Pittman Jr.			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015		
Mailing Address 20 Scenic View Dr			Amount of Each Disbursement this Period 1000.00		
City Sicklerville	State NJ	Zip Code 08081	<input type="checkbox"/> Memo Item Transaction ID : SB17.9621		
Purpose of Disbursement Consulting Services Expense - Advance		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Anthony R Pittman Jr.			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015		
Mailing Address 20 Scenic View Dr			Amount of Each Disbursement this Period 1000.00		
City Sicklerville	State NJ	Zip Code 08081	<input type="checkbox"/> Memo Item Transaction ID : SB17.9653		
Purpose of Disbursement Consulting Services Expense - Advance		001 Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	2750.00
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 48 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Melissa D Pollitt			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2015	
Mailing Address PO Box 160			Amount of Each Disbursement this Period 130.52	
City Collingswood	State NJ	Zip Code 08108	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Reimbursement - Campaign Candy		Category/ Type 006	Transaction ID : SB17.9678	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Melissa D Pollitt			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address PO Box 160			Amount of Each Disbursement this Period 16.86	
City Collingswood	State NJ	Zip Code 08108	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Reimbursement - Shipping Expense		Category/ Type 001	Transaction ID : SB17.9689	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Staples			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015	
Mailing Address 2230 Marlton Pike West			Amount of Each Disbursement this Period 16.86	
City Cherry Hill	State NJ	Zip Code 08002	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement Shipping Expense		Category/ Type 001	Transaction ID : SB17.9689.0	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	147.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RP Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015		
Mailing Address PO Box 3540			Amount of Each Disbursement this Period 5000.00		
City Cherry Hill	State NJ	Zip Code 08034	<input type="checkbox"/> Memo Item Transaction ID : SB17.9607		
Purpose of Disbursement Consulting Services Expense - Fundraising		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. RP Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2015		
Mailing Address PO Box 3540			Amount of Each Disbursement this Period 5000.00		
City Cherry Hill	State NJ	Zip Code 08034	<input type="checkbox"/> Memo Item Transaction ID : SB17.9731		
Purpose of Disbursement Consulting Services Expense - Fundraising		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. RP Consulting, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015		
Mailing Address PO Box 3540			Amount of Each Disbursement this Period 5000.00		
City Cherry Hill	State NJ	Zip Code 08034	<input type="checkbox"/> Memo Item Transaction ID : SB17.9668		
Purpose of Disbursement Consulting Services Expense - Fundraising		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	15000.00
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 50 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Speedway		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015
Mailing Address 1420 Admiral Wilson Blvd		Amount of Each Disbursement this Period 38.41
City Camden	State NJ	
Zip Code 08109	Purpose of Disbursement Travel - Gas Expense	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 002	Transaction ID : SB17.9675
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Cooper Foundation		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015
Mailing Address 200 Federal St Ste 146		Amount of Each Disbursement this Period 500.00
City Camden	State NJ	
Zip Code 08103	Purpose of Disbursement Donation / Advertisement	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : SB17.9619
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Kove		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 20 West Atlantic Ave		Amount of Each Disbursement this Period 326.03
City Audubon	State NJ	
Zip Code 08106	Purpose of Disbursement Staff Holiday Lunch	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : SB17.9676
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	864.44
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 51 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Twenty-First Century Group, Inc.			Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2015	
Mailing Address 434 New Jersey Ave SE			Amount of Each Disbursement this Period 1050.00	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Fundraising Reception Expense		Category/ Type 003		
Candidate Name			Transaction ID : SB17.9669	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. UPS			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015	
Mailing Address PO Box 7247-0244			Amount of Each Disbursement this Period 15.05	
City Philadelphia	State PA	Zip Code 19170	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Express Mail Expense		Category/ Type 001		
Candidate Name			Transaction ID : SB17.9651	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. UPS			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015	
Mailing Address PO Box 7247-0244			Amount of Each Disbursement this Period 45.15	
City Philadelphia	State PA	Zip Code 19170	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Express Mail Expense		Category/ Type 001		
Candidate Name			Transaction ID : SB17.9684	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1110.20
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 52 OF 56	
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US Capitol Historical Society			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2015	
Mailing Address 200 Maryland Ave NE			Amount of Each Disbursement this Period 2555.00	
City Washington	State DC	Zip Code 20002	<input type="checkbox"/> Memo Item Transaction ID : SB17.9654	
Purpose of Disbursement Capitol Calendars - Holiday Gifts		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. US House of Representatives Gift Shop			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2015	
Mailing Address Longworth Bldg			Amount of Each Disbursement this Period 19.20	
City Washington	State DC	Zip Code 20515	<input type="checkbox"/> Memo Item Transaction ID : SB17.9609	
Purpose of Disbursement Gifts for Charitable Donation		Category/ Type 012		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. US House of Representatives Gift Shop			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2015	
Mailing Address Longworth Bldg			Amount of Each Disbursement this Period 69.90	
City Washington	State DC	Zip Code 20515	<input type="checkbox"/> Memo Item Transaction ID : SB17.9628	
Purpose of Disbursement Gifts for Congressional Travel		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	2644.10
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 53 OF 56			
	<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)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US House of Representatives Gift Shop			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2015		
Mailing Address Longworth Bldg			Amount of Each Disbursement this Period 57.30		
City Washington	State DC	Zip Code 20515	<input type="checkbox"/> Memo Item Transaction ID : SB17.9674		
Purpose of Disbursement Holiday Gifts Expense		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. US Postmaster (Cherry Hill)			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2015		
Mailing Address 1175 Markress Rd			Amount of Each Disbursement this Period 16.28		
City Cherry Hill	State NJ	Zip Code 08034	<input type="checkbox"/> Memo Item Transaction ID : SB17.9686		
Purpose of Disbursement Postage Expense		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code	<input type="checkbox"/> Memo Item		
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	73.58
TOTAL This Period (last page this line number only).....	40975.91

**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 54 OF 56	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DONALD NORCROSS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Friends for John Carney			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2015	
Mailing Address 410 1st St SE Suite 310			Amount of Each Disbursement this Period 1200.00	
City Washington	State DC	Zip Code 20003	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : SB21.9735	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	1200.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DONALD NORCROSS FOR CONGRESS** Transaction ID : **SC/10.9324**

LOAN SOURCE Full Name (Last, First, Middle Initial) DONALD W NORCROSS <i>PERSONAL FUNDS</i> <input type="checkbox"/> Memo Item	Election: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1 MARKET STREET UNIT 522	

City	State	ZIP Code
CAMDEN	NJ	08102

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15161.83	0.00	15161.83

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
09 / 20 / 2015	DEMAND	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	15161.83
TOTALS This Period (last page in this line only).....	15161.83

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SC/10

Transaction ID : SC/10.9324

Personal loan securing campaign vehicle lease term obligation beyond current office term. See Transaction ID: SB/17.9236.

Form/Schedule:

Transaction ID: