

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NEW JERSEY REPUBLICAN STATE COMMITTEE

ADDRESS (number and street)

PO BOX 68

Check if different
than previously
reported. (ACC)

SUMMIT

NJ

07902

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00164418

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☒ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

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

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

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

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2025

through

M M M / D D D / Y Y Y Y Y Y
05 31 2025

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

VAN DOREN, SHAUN, , ,

Signature of Treasurer

VAN DOREN, SHAUN, , ,

Date

M M M / D D D / Y Y Y Y Y Y
06 20 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NEW JERSEY REPUBLICAN STATE COMMITTEE

Report Covering the Period:

From:

MM / DD / YYYY
05 / 01 / 2025

To:

MM / DD / YYYY
05 / 31 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		95951.89
(b) Cash on Hand at Beginning of Reporting Period.....	63574.79	
(c) Total Receipts (from Line 19)	1845.73	176764.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	65420.52	272715.90
7. Total Disbursements (from Line 31)	24962.08	232257.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40458.44	40458.44
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)	6598.96	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

NEW JERSEY REPUBLICAN STATE COMMITTEE

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	245.00	32055.00
(ii) Unitemized	618.97	3759.29
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	863.97	35814.29
(b) Political Party Committees	0.00	7500.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	863.97	53314.29
12. Transfers From Affiliated/Other Party Committees.....	0.00	27204.92
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	979.00	979.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.76	15.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	95250.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	95250.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1845.73	176764.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1845.73	81514.01

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	5234.56	40939.56
(ii) Non-Federal Share.....	19691.94	154010.63
(b) Other Federal Operating Expenditures	35.58	1022.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24962.08	195972.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	27204.92
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	9080.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	9080.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24962.08	232257.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5270.14	78246.83

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	863.97	53314.29
34. Total Contribution Refunds (from Line 28(d))	0.00	9080.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	863.97	44234.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5270.14	41961.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	979.00	979.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	4291.14	40982.91

: 97 `A-G79 @5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: F3XN
Transaction ID :

WITH RESPECT TO THE EXPENDITURES MADE BY THE PARTY FOR PAYROLL, PAYROLL TAXES, INSURANCE, AND OTHER PAYROLL OR EMPLOYEE BENEFIT-RELATED EXPENSES, THE PARTY ADHERES TO 11 CFR 300.33, AND ALSO FOLLOWS THE COMMISSIONS REVISION OF THE RULES AS ADOPTED ON DECEMBER 1, 2005. SPECIFICALLY, THE PARTY PAYS FOR THESE COSTS WITH 100 PERCENT FEDERAL FUNDS WHEN THE EMPLOYEE SPENDS MORE THAN 25 PERCENT OF HIS OR HER TIME IN A PAY PERIOD ON FEDERAL ELECTION ACTIVITY FEA OR ACTIVITY IN CONNECTION WITH A FEDERAL ELECTION. THESE EXPENDITURES ARE REPORTED ON SCHEDULE B FOR LINE 30B. ALTERNATIVELY, WHEN AN EMPLOYEE DOES NOT MEET THE 25 PERCENT THRESHOLD, THE PARTY ALLOCATES THESE COSTS AS AN OVERHEAD/ADMINISTRATIVE EXPENSE, AND REPORTS THESE DISBURSEMENTS ON SCHEDULE H4. ADDITIONALLY, EMPLOYEES PAYROLL AND REIMBURSED EXPENSES ARE PAID ACCORDING TO THE ACTIVITIES THEY PARTICIPATE IN, WHETHER IT IS A FULLY FEDERAL OR FEA ACTIVITY, OR AN ADMINISTRATIVE OR OTHERWISE PERMISSIBLE ALLOCATED ACTIVITY, AS INDICATED BY THE DOCUMENTATION PROVIDED BY THE EMPLOYEE.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 18
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FAVA, RONALD, , ,Mailing Address 155 WILLOWBROOK BLVD
SUITE 350City
WAYNEState
NJZip Code
07470-7033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2025

Transaction ID : AB3CAD19CC5AA4E72A71

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KULBERDA, ANTONIA, , ,

Mailing Address 39 CURTIS CT

City

KENDALL PARK

State

NJ

Zip Code

08824-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
D'BELLA SALONOccupation (for Individual)
RECEPTIONIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2025

Transaction ID : AE3822BC00C114042A71

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TYBURCZY, KENNETH, , ,

Mailing Address 133 ORCHARD PL

City

RAMSEY

State

NJ

Zip Code

07446-2491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PROJECT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2025

Transaction ID : A33E4C0F7D0844AF9970

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

245.00

245.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRAVELERS

Mailing Address PO BOX 5600

City
HARTFORDState
CTZip Code
06102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

979.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2025

Transaction ID : A3994F5FE545342159D4

Amount of Each Receipt this Period

979.00

☐ Memo Item

INSURANCE REFUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

979.00

979.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 18

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

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NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
MERCHANT PROCESSING FEE
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2025

FEC Identification Number

C

Transaction ID : B36E9434C2f

Amount of Each Disbursement this Period

3.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
MERCHANT PROCESSING FEE
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 19 / 2025

FEC Identification Number

C

Transaction ID : B62BB30112f

Amount of Each Disbursement this Period

0.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
MERCHANT PROCESSING FEE
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2025

FEC Identification Number

C

Transaction ID : BCEE92C53f

Amount of Each Disbursement this Period

6.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 18

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

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NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
MERCHANT PROCESSING FEE
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2025

FEC Identification Number

C

Transaction ID : B84E5FEDCE

Amount of Each Disbursement this Period

6.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.41

16.70

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 18

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALEZ, KENNITH, , ,

Nature of Debt (Purpose):

EVENT TRAVEL

Mailing Address 603 16TH STREET

City

UNION CITY

State

NJ

Zip Code

07087-3230

Outstanding Balance Beginning This Period

0.00

Transaction ID : D4BD7A81F4F4A45D0A64

Amount Incurred This Period

226.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

226.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RIGHT INSIGHT LLC

Nature of Debt (Purpose):

DATA SERVICES

Mailing Address PO BOX 421

City

BOISE

State

ID

Zip Code

83701-0421

Outstanding Balance Beginning This Period

0.00

Transaction ID : D160F037BD7A842DC8CB

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

GONZALEZ, KENNITH, , ,

Nature of Debt (Purpose):

EVENT TRAVEL AND LODGING

Mailing Address 603 16TH STREET

City

UNION CITY

State

NJ

Zip Code

07087-3230

Outstanding Balance Beginning This Period

0.00

Transaction ID : DAAAA0D1A3F824E64A4E

Amount Incurred This Period

804.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

804.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

3530.96

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 12 OF 18

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ARCHER & GREINER, P C

Nature of Debt (Purpose):

LEGAL FEES

Mailing Address 1025 LAUREL OAK ROAD

City

VOORHEES

State

NJ

Zip Code

08043-3506

Outstanding Balance Beginning This Period

0.00

Transaction ID : D9F7926480C244178828

Amount Incurred This Period

3068.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3068.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

3068.00

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

6598.96

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

6598.96

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

PAGE 13 OF 18

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H2A5E027699DB4E/ <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADP			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 504 CLINTON CENTER DRIVE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CLINTON	State MS	Zip Code 39056-5677	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL FEES		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			170554.16	
Category/ Type		Date		
		MM / DD / YYYY		
		05 / 02 / 2025		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
22.15			83.32	105.47

B. Full Name (Last, First, Middle Initial) Transaction ID : HCDE5785DE72A42/ <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
MAILCHIMP			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 675 PONCE DE LEON AVENUE NE SUITE 5000			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City ATLANTA	State GA	Zip Code 30308-1884	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: SUBSCRIPTION-EMAIL SERVICE		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			170554.16	
Category/ Type		Date		
		MM / DD / YYYY		
		05 / 02 / 2025		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
89.25			335.75	425.00

C. Full Name (Last, First, Middle Initial) Transaction ID : HBB0961B3289A45/ <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
GOOGLE SERVICES			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1600 AMPHITHEATRE PKWAY			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PHONE SERVICE		<input type="text"/>	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			170639.27	
Category/ Type		Date		
		MM / DD / YYYY		
		05 / 05 / 2025		
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
2.75			10.36	13.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.15		429.43		543.58

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

PAGE 14 OF 18

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H5C6D7DF9874545C <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
GOOGLE SERVICES			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 1600 AMPHITHEATRE PKWAY			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
MOUNTAIN VIEW	CA	94043-1351		
Purpose of Disbursement:		Category/ Type	Allocated Activity or Event Year-To-Date	
E-MAIL SERVICE			170639.27	
Activity or Event Identifier:		Date	M M / D D / Y Y Y Y Y Y	
ADMINISTRATIVE			05 / 05 / 2025	
FEDERAL SHARE		+	NONFEDERAL SHARE	
15.12			56.88	
		=	TOTAL AMOUNT	
			72.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : HC45147FBC9354C6 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
GONZALEZ, KENNITH, ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 603 16TH STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
UNION CITY	NJ	07087-3230		
Purpose of Disbursement:		Category/ Type	Allocated Activity or Event Year-To-Date	
REIMB-EVENT REGISTRATION			170739.27	
Activity or Event Identifier:		Date	M M / D D / Y Y Y Y Y Y	
ADMINISTRATIVE			05 / 06 / 2025	
FEDERAL SHARE		+	NONFEDERAL SHARE	
21.00			79.00	
		=	TOTAL AMOUNT	
			100.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : HF3676FCD3CC74C <input checked="" type="checkbox"/> Memo Item			Allocated Activity or Event:	
REPUBLICAN NATIONAL COMMITTEE			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 310 1ST ST SE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
WASHINGTON	DC	20003-1885		
Purpose of Disbursement:		Category/ Type	Allocated Activity or Event Year-To-Date	
[MEMO] EVENT REGISTRATION FEE			100.00	
Activity or Event Identifier:		Date	M M / D D / Y Y Y Y Y Y	
ADMINISTRATIVE			04 / 10 / 2025	
FEDERAL SHARE		+	NONFEDERAL SHARE	
21.00			79.00	
		=	TOTAL AMOUNT	
			100.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.12		135.88		172.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 15 OF 18

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : HE953E13DEC634F6 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
CATCH DIGITAL STRATEGY			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3267 BEE CAVES RD			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City AUSTIN	State TX	Zip Code 78746-6700	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DIGITAL CONSULTING		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			172239.27	
FEDERAL SHARE		+	NONFEDERAL SHARE	
315.00			1185.00	
		=	TOTAL AMOUNT	
			1500.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H45B8DEA84C7443E <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
ARISTOTLE INTERNATIONAL INC.			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 205 PENNSYLVANIA AVENUE SE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City WASHINGTON	State DC	Zip Code 20003-1164	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: COMPLIANCE SOFTWARE		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			174639.27	
FEDERAL SHARE		+	NONFEDERAL SHARE	
504.00			1896.00	
		=	TOTAL AMOUNT	
			2400.00	

C. Full Name (Last, First, Middle Initial) Transaction ID : H2ED1BE3754364FI <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
GONZALEZ, KENNITH, , ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 603 16TH STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City UNION CITY	State NJ	Zip Code 07087-3230	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			178987.52	
FEDERAL SHARE		+	NONFEDERAL SHARE	
612.09			2302.63	
		=	TOTAL AMOUNT	
			2914.72	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1431.09		5383.63		6814.72

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : HFB02D13367A9468 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADP			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 504 CLINTON CENTER DRIVE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CLINTON	State MS	Zip Code 39056-5677	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL TAXES		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			178987.52	
FEDERAL SHARE		+	NONFEDERAL SHARE	
301.04			1132.49	
		=	TOTAL AMOUNT	
			1433.53	

B. Full Name (Last, First, Middle Initial) Transaction ID : HEA0BE3A0160943E <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADP			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 504 CLINTON CENTER DRIVE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CLINTON	State MS	Zip Code 39056-5677	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL FEES		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			179101.94	
FEDERAL SHARE		+	NONFEDERAL SHARE	
24.03			90.39	
		=	TOTAL AMOUNT	
			114.42	

C. Full Name (Last, First, Middle Initial) Transaction ID : HBDA322ECEC014C <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
CATCH DIGITAL STRATEGY			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3267 BEE CAVES RD			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City AUSTIN	State TX	Zip Code 78746-6700	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: DIGITAL CONSULTING		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			180601.94	
FEDERAL SHARE		+	NONFEDERAL SHARE	
315.00			1185.00	
		=	TOTAL AMOUNT	
			1500.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
640.07		2407.88		3047.95

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

PAGE 17 OF 18

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H2B6B28430F7445A <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
GONZALEZ, KENNITH, , ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 603 16TH STREET			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City UNION CITY	State NJ	Zip Code 07087-3230	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			184950.19	
FEDERAL SHARE		+	NONFEDERAL SHARE	
612.08			2302.61	
		=	TOTAL AMOUNT	
			2914.69	

B. Full Name (Last, First, Middle Initial) Transaction ID : H7B9FEC6691444E2 <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
ADP			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 504 CLINTON CENTER DRIVE			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CLINTON	State MS	Zip Code 39056-5677	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: PAYROLL TAXES		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			184950.19	
FEDERAL SHARE		+	NONFEDERAL SHARE	
301.05			1132.51	
		=	TOTAL AMOUNT	
			1433.56	

C. Full Name (Last, First, Middle Initial) Transaction ID : HCD32B52FE9134B <input type="checkbox"/> Memo Item			Allocated Activity or Event:	
BATTAGLIA, JACQUELINE, , ,			<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 33 REAGANS RUN			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City CAPE MAY COURT HOUSE	State NJ	Zip Code 08210-1630	<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: GENERAL FUNDRAISING CONSULTING (NON-EMPLOYEE)		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: ADMINISTRATIVE			194950.19	
FEDERAL SHARE		+	NONFEDERAL SHARE	
840.00			3160.00	
		=	TOTAL AMOUNT	
			4000.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1753.13		6595.12		8348.25

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
NEW JERSEY REPUBLICAN STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H58E45D15AABE4B Memo Item

SAGE ADVISORY GROUP

Mailing Address 7816 ROSE GARDEN LN

City

SPRINGFIELD

State

VA

Zip Code

22153-2368

Purpose of Disbursement:

COMPLIANCE & BOOKKEEPING

Activity or Event Identifier:

ADMINISTRATIVE

Category/Type

Allocated Activity or Event:

☒ Administrative

☐ Fundraising

☐ Exempt

☐ Voter Drive

☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194950.19

Date

MM

05

DD

30

YYYY

2025

FEDERAL SHARE

1260.00

+

NONFEDERAL SHARE

4740.00

=

TOTAL AMOUNT

6000.00

B. Full Name (Last, First, Middle Initial) Memo Item

Mailing Address

City

State

Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:

☐ Administrative

☐ Fundraising

☐ Exempt

☐ Voter Drive

☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

MM

DD

YYYY

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) Memo Item

Mailing Address

City

State

Zip Code

Purpose of Disbursement:

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:

☐ Administrative

☐ Fundraising

☐ Exempt

☐ Voter Drive

☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date

MM

DD

YYYY

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

1260.00

+

NONFEDERAL SHARE

4740.00

=

TOTAL AMOUNT

6000.00

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

FEDERAL SHARE

5234.56

NONFEDERAL SHARE

19691.94

TOTAL AMOUNT

24926.50

FEC Schedule H4 (Form 3X) Rev. 05/2016