

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

NORPAC

ADDRESS (number and street) PO Box 5595

Check if different than previously reported. (ACC)

Englewood NJ 07631

2. **FEC IDENTIFICATION NUMBER** C00247403

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

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

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on _____ in the State of _____

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

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

5. Covering Period 05 01 2009 through 05 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karen Pichkhadze

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

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

Office Use Only												FEC FORM 3X (Rev. 12/2004)
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A. Form/Schedule : **F3XA**

Transaction ID :

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NORPAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		455323.41
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	531592.80									
(c) Total Receipts (from Line 19)	86019.18	273173.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	617611.98	728496.90								
7. Total Disbursements (from Line 31)	106923.03	217807.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	510688.95	510688.95								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
NORPAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	75872.90	215129.40
(ii) Unitemized	9955.00	52496.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	85827.90	267625.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	85827.90	267625.40
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	2499.23
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	191.28	3048.86
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	86019.18	273173.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	86019.18	273173.49

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	12.30
(b) Other Federal Operating Expenditures.....	53148.03	102065.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	53148.03	102077.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52400.00	110355.00
24. Independent Expenditure (use Schedule E)	0.00	2000.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1375.00	1375.00
(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))	1375.00	1375.00
29. Other Disbursements.....	0.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	106923.03	217807.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	106923.03	217795.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	85827.90	267625.40
34. Total Contribution Refunds (from Line 28(d))	1375.00	1375.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84452.90	266250.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	53148.03	102065.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2499.23
38. Net Operating Expenditures (subtract Line 37 from Line 36)	53148.03	99566.42

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
steven adelsberg

Mailing Address 258 Beaumont St.

City State Zip Code
Brooklyn NY 11235

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 31 / 2009
Transaction ID: SA11AI.24969

Amount of Each Receipt this Period
500.00

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

Mailing Address 470 Herkimer Avenue

City State Zip Code
Haworth NJ 07641

FEC ID number of contributing federal political committee. C

Name of Employer Bracewell & Giuliani LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 10 / 2009
Transaction ID: SA11AI.24868

Amount of Each Receipt this Period
250.00

earmark-dan burton

C. Full Name (Last, First, Middle Initial)
Eden Aronoff

Mailing Address 151 sherwood pl

City State Zip Code
englewood NE 07631

FEC ID number of contributing federal political committee. C

Name of Employer sefl Occupation social worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
05 / 07 / 2009
Transaction ID: SA11AI.25043

Amount of Each Receipt this Period
400.00

mission

SUBTOTAL of Receipts This Page (optional) 1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) maureen ash		Date of Receipt
	Mailing Address 11112 magnolia rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 07 / 2009
	City	State	Zip Code
	teaneck	NJ	07666
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.25039
Name of Employer n/a		Occupation n/a	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 225.00
			mission

B.	Full Name (Last, First, Middle Initial) Ariela Balk		Date of Receipt
	Mailing Address 30 Chestnut Ct		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 12 / 2009
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.25119
Name of Employer Ariela-Alpha Int.		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			mission

C.	Full Name (Last, First, Middle Initial) Susan Basloe		Date of Receipt
	Mailing Address 370 Cumberland St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 11 / 2009
	City	State	Zip Code
	Engelwood	NJ	07631
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.25107
Name of Employer SMB Marketing		Occupation Employee	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			mission

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 825.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Alan Berger

Mailing Address 24 Sutton Pl.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt MM / DD / YYYY
05 / 01 / 2009

Transaction ID: SA11AI.24856

Amount of Each Receipt this Period 250.00

earmark-Senator Lincoln

B. Full Name (Last, First, Middle Initial)
Noah Berkowitz

Mailing Address 20 disbrow circle

City new rochelle State NY Zip Code 10804

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

Name of Employer synvista Occupation exec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
05 / 05 / 2009

Transaction ID: SA11AI.25022

Amount of Each Receipt this Period 300.00

mission

C. Full Name (Last, First, Middle Initial)
David Blady

Mailing Address 6 Jagger Ct.

City West Orange State NJ Zip Code 07052

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

Name of Employer Neurological Consultants, PA Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
05 / 10 / 2009

Transaction ID: SA11AI.25077

Amount of Each Receipt this Period 175.00

mission

SUBTOTAL of Receipts This Page (optional) 725.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 69
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Benjamin Brafman

Mailing Address 15 Waverly Place

City State Zip Code
Lawrence NY 11559

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.25136

Amount of Each Receipt this Period
1000.00

membership

B.

Full Name (Last, First, Middle Initial)
Laurie Bryk

Mailing Address 234 briarwood crossing

City State Zip Code
Lawrence NY 11559

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2009

Transaction ID: SA11AI.25078

Amount of Each Receipt this Period
300.00

mission

C.

Full Name (Last, First, Middle Initial)
Deborah Chustckie

Mailing Address 4 Aspen Ct

City State Zip Code
East Brunswick NJ 08816

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

Name of Employer Cedar Grove Dental Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.25045

Amount of Each Receipt this Period
300.00

mission

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) oscar echman		Date of Receipt
	Mailing Address 588 Highland Ave		<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation N/A	Transaction ID: SA11AI.24888
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
			conduit-evan bayh
			[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Reuven Escott		Date of Receipt
	Mailing Address 55 Regent St.		<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bergenfield	NJ	07621
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Securities Trader	Transaction ID: SA11AI.24883
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2125.00"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
			earmark-evan bayh

C.	Full Name (Last, First, Middle Initial) Hershel Feldman		Date of Receipt
	Mailing Address 250 Hutchinson Rd.		<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Englewood	NJ	07631
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Macabee Trading		Occupation Sales	Transaction ID: SA11AI.24980
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="505.00"/>	Amount of Each Receipt this Period <input type="text" value="360.00"/>
			conduit-eric cantor
			[MEMO ITEM]

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Daniel Feuer

Mailing Address 335 Robin Road

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 125.00

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.24890

Amount of Each Receipt this Period 150.00

conduit-evan bayh

[MEMO ITEM]

B.

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

Mailing Address 348 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Financier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6295.80

Date of Receipt 05 / 01 / 2009

Transaction ID: SA11AI.25741

Amount of Each Receipt this Period 897.90

C.

Full Name (Last, First, Middle Initial)
Murray Forman

Mailing Address 291 Ocean Ave

City Lawrence State NY Zip Code 11559

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

Name of Employer Self Occupation Investment Banking

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2009

Transaction ID: SA11AI.24925

Amount of Each Receipt this Period 1000.00

earmark-harry reid

SUBTOTAL of Receipts This Page (optional) ► 1897.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Mort Fridman
 Mailing Address 826 Winthrop Rd
 City State Zip Code
 Teaneck NJ 07666
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 2 / 2 0 0 9
Transaction ID: SA11AI.24871
 Amount of Each Receipt this Period
 500.00
 earmark-dan burton
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation
 Self MD
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 4875.00

B. Full Name (Last, First, Middle Initial)
David Friedman
 Mailing Address 12 Wood Lane South
 City State Zip Code
 Woodsburgh NY 11598
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 9
Transaction ID: SA11AI.24927
 Amount of Each Receipt this Period
 4800.00
 earmark-harry reid
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation
 Self Attorney
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 4800.00

C. Full Name (Last, First, Middle Initial)
David Friedman
 Mailing Address 12 Wood Lane South
 City State Zip Code
 Woodsburgh NY 11598
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 9
Transaction ID: SA11AI.25164
 Amount of Each Receipt this Period
 200.00
 membership
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation
 Self Attorney
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 69
(check only one)

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

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

NAME OF COMMITTEE (In Full)
NORPAC

A.

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

Mailing Address 1626 Buckingham Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation Oral surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt MM / DD / YYYY
05 / 11 / 2009

Transaction ID: SA11AI.25266

Amount of Each Receipt this Period 300.00

mission

B.

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

Mailing Address 12 Wood Ln. South

City State Zip Code
Woodsburgh NY 11598

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

Name of Employer n/a Occupation n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.25137

Amount of Each Receipt this Period 1800.00

membership

C.

Full Name (Last, First, Middle Initial)
david gibber

Mailing Address 515 West End Ave

City State Zip Code
New York NY 10025

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

Name of Employer school Occupation student

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.25246

Amount of Each Receipt this Period 500.00

mission

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Henry Glenn

Mailing Address 237 Fountain Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 07 / 2009

Transaction ID: SA11AI.25223

Amount of Each Receipt this Period 425.00

mission

B.

Full Name (Last, First, Middle Initial)
Helen Goldberg

Mailing Address 791 East Lawn Dr

City Teaneck State NJ Zip Code 07666

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

Name of Employer Corenet Associates Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 11 / 2009

Transaction ID: SA11AI.25110

Amount of Each Receipt this Period 350.00

mission

C.

Full Name (Last, First, Middle Initial)
Judith Goldberg

Mailing Address 207 Booth Avenue

City Englewood State NJ Zip Code 07631

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

Name of Employer N/A Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 09 / 2009

Transaction ID: SA11AI.25070

Amount of Each Receipt this Period 300.00

mission

SUBTOTAL of Receipts This Page (optional) ► 1075.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Murray Goldberg	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 1132 Sussex Rd.	Transaction ID: SA11AI.25168
	City State Zip Code Teaneck NJ 07666	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	membership
Name of Employer Regeneron Pharmaceuticals	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) Stewart Goldberg	Date of Receipt MM / DD / YYYY 05 / 07 / 2009
	Mailing Address 333 East Linden Ave.	Transaction ID: SA11AI.25049
	City State Zip Code Englewood NJ 07631	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	mission
Name of Employer Marathon Assets	Occupation Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Ann Goldfischer	Date of Receipt MM / DD / YYYY 05 / 22 / 2009
	Mailing Address 37 Cunningham Dr.	Transaction ID: SA11AI.25155
	City State Zip Code West Orange NJ 07052	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	mission
Name of Employer Self	Occupation Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Anne Gontownik
Mailing Address 250 Mountain Rd.
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 950.00
Date of Receipt 05 / 05 / 2009
Transaction ID: SA11AI.25025
Amount of Each Receipt this Period 175.00
mission

B. Full Name (Last, First, Middle Initial)
Anne Gontownik
Mailing Address 250 Mountain Rd.
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1125.00
Date of Receipt 05 / 07 / 2009
Transaction ID: SA11AI.25050
Amount of Each Receipt this Period 175.00
mission

C. Full Name (Last, First, Middle Initial)
Robert M. Gottesman
Mailing Address 285 Sunset Avenue
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation CPA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00
Date of Receipt 05 / 10 / 2009
Transaction ID: SA11AI.24870
Amount of Each Receipt this Period 150.00
earmark-dan burton

SUBTOTAL of Receipts This Page (optional) ▶ 500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 18 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 59 Bliss Ave

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Maniv Energy Capital Business Exec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2009

Transaction ID: SA11AI.24891

Amount of Each Receipt this Period
1000.00

earmark-evan bayh

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

Mailing Address 240 Maple St.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Self Venture Capitalist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2009

Transaction ID: SA11AI.25061

Amount of Each Receipt this Period
600.00

mission

C. Full Name (Last, First, Middle Initial)
Jack Halpern

Mailing Address 160 W. 66th St.

City State Zip Code
New York NY 10023

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

Name of Employer Occupation
Atlantic Realty Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2009

Transaction ID: SA11AI.24866

Amount of Each Receipt this Period
1000.00

earmark-blanche lincoln

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Jack Halpern	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 160 W. 66th St.	Transaction ID: SA11AI.24904
	City State Zip Code New York NY 10023	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	earmark-evan bayh
Name of Employer Atlantic Realty	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8000.00	

B.	Full Name (Last, First, Middle Initial) Daniel Hassid	Date of Receipt MM / DD / YYYY 05 / 06 / 2009
	Mailing Address 205 E 95th St	Transaction ID: SA11AI.25035
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 275.00
	FEC ID number of contributing federal political committee. C	mission
Name of Employer Newmark	Occupation Commercial Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) Ben Heller	Date of Receipt MM / DD / YYYY 05 / 18 / 2009
	Mailing Address 10 Dogwood Lane	Transaction ID: SA11AI.25141
	City State Zip Code Lawrence NY 11559	Amount of Each Receipt this Period 1800.00
	FEC ID number of contributing federal political committee. C	membership
Name of Employer Self	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional)	▶	4075.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 69
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Andrew Herenstein

Mailing Address 3 Dogwood Lane

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Quadrangle Managing Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.25142

Amount of Each Receipt this Period
1000.00

membership

B.

Full Name (Last, First, Middle Initial)
Scott Herschmann

Mailing Address 102 Huguenot Ave.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
self trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2009

Transaction ID: SA11AI.25111

Amount of Each Receipt this Period
675.00

mission

C.

Full Name (Last, First, Middle Initial)
Iance Hirt

Mailing Address 71 Muriel Ave

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Lindsay Goldberg Fund Mngmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.25143

Amount of Each Receipt this Period
1800.00

membership

SUBTOTAL of Receipts This Page (optional) ► **3475.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Jeffrey Hochman
Mailing Address 458 Rutland Ave.
City State Zip Code
Teaneck NJ 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Willkie, Farr and Gallagher Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt: 05 / 04 / 2009
Transaction ID: SA11AI.25019
Amount of Each Receipt this Period: 600.00
mission

B. Full Name (Last, First, Middle Initial)
Jay Hochshtein
Mailing Address 32 Hampton Ct.
City State Zip Code
Bergenfield NJ 07621
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NY Medical Alliance MD
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00
Date of Receipt: 05 / 10 / 2009
Transaction ID: SA11AI.25080
Amount of Each Receipt this Period: 425.00
mission

C. Full Name (Last, First, Middle Initial)
Kenneth Hoffman
Mailing Address 637 N. Forest Dr.
City State Zip Code
Teaneck NJ 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Lehman Brothers Stock Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00
Date of Receipt: 05 / 06 / 2009
Transaction ID: SA11AI.25036
Amount of Each Receipt this Period: 175.00
mission

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 69
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
charlie hong

Mailing Address 19 Burton Pl

City State Zip Code
Creskill NJ 07626

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

Name of Employer Occupation
Hong's MErchandising Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 19 / 2009

Transaction ID: SA11AI.24892

Amount of Each Receipt this Period
250.00

conduit-evan bayh

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Elaine Jacobs

Mailing Address 480 Cumberland Road

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
n/a Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2009

Transaction ID: SA11AI.25026

Amount of Each Receipt this Period
175.00

mission

C.

Full Name (Last, First, Middle Initial)
Elaine Jacobs

Mailing Address 480 Cumberland Road

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
n/a Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2009

Transaction ID: SA11AI.24982

Amount of Each Receipt this Period
250.00

conduit-eric cantor

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► **175.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 69
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Jerry Jozsef

Mailing Address 931 Phelps Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation
Self Pastry Chef

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 09 / 2009

Transaction ID: SA11AI.25071

Amount of Each Receipt this Period
300.00

mission

B.

Full Name (Last, First, Middle Initial)
Esti Kaminetzky

Mailing Address 786 Downing St

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation
Self Learning Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.25260

Amount of Each Receipt this Period
400.00

mission

C.

Full Name (Last, First, Middle Initial)
marc kasowitz

Mailing Address 1160 Park Ave

City State Zip Code
New York NY 10128

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

Name of Employer Self Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.24929

Amount of Each Receipt this Period
4800.00

earmark-harry reid

SUBTOTAL of Receipts This Page (optional) ▶ **5500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
marc kasowitz

Mailing Address 1160 Park Ave

City State Zip Code
New York NY 10128

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

Name of Employer Self Occupation
Self Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.25165

Amount of Each Receipt this Period
200.00

membership

B.

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

Mailing Address 315 North Ave

City State Zip Code
Westport CT 06880

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

Name of Employer Self Occupation
Self Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.25040

Amount of Each Receipt this Period
5000.00

membership

C.

Full Name (Last, First, Middle Initial)
eleanor klein

Mailing Address 9 laurence Ct

City State Zip Code
Closter NJ 07624

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

Name of Employer Teanekill Middle School Occupation
Library Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
05 / 19 / 2009

Transaction ID: SA11AI.24894

Amount of Each Receipt this Period
1000.00

conduit-evan bayh

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 5200.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10300.00

Date of Receipt 05 / 11 / 2009

Transaction ID: SA11AI.24861

Amount of Each Receipt this Period 500.00

earmark-sen. blanche linc-
oln

B.

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12275.00

Date of Receipt 05 / 11 / 2009

Transaction ID: SA11AI.25112

Amount of Each Receipt this Period 1975.00

mission

C.

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12400.00

Date of Receipt 05 / 11 / 2009

Transaction ID: SA11AI.25113

Amount of Each Receipt this Period 125.00

mission

SUBTOTAL of Receipts This Page (optional) ► 2600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 69

(check only one)

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

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

NAME OF COMMITTEE (In Full)
NORPAC

A.

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

Mailing Address 280 Jones Rd.

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 12400.00

Date of Receipt 05 / 28 / 2009

Transaction ID: SA11AI.24905

Amount of Each Receipt this Period 500.00

conduit-evan bayh

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Abraham J. Kramer

Mailing Address 216 S. Dwight Place

City Englewood State NJ Zip Code 07631

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 18 / 2009

Transaction ID: SA11AI.25145

Amount of Each Receipt this Period 3000.00

membership

C.

Full Name (Last, First, Middle Initial)
Jack Lahav

Mailing Address 6 Bellcourt I

City Livingston State NJ Zip Code 07039

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Pastry Chef

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 09 / 2009

Transaction ID: SA11AI.25072

Amount of Each Receipt this Period 275.00

mission

SUBTOTAL of Receipts This Page (optional) 3275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Eliot Lauer

Mailing Address 240 Briarwood Crossing

City State Zip Code
Lawrence NY 11559

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

Name of Employer Occupation
Curtis, Mallet-Prevost, et al Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 05 / 18 / 2009
Transaction ID: SA11AI.25252
Amount of Each Receipt this Period: 1000.00
membership

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

Mailing Address 140 Downey Dr.

City State Zip Code
Tenafly NJ 07670

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

Name of Employer Occupation
ADAR Investment Management Portfolio Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1625.00

Date of Receipt: 05 / 22 / 2009
Transaction ID: SA11AI.24872
Amount of Each Receipt this Period: 1000.00
earmark-dan burton

C. Full Name (Last, First, Middle Initial)
Karl Lifschitz

Mailing Address 379 Winthrop Rd

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 07 / 2009
Transaction ID: SA11AI.25053
Amount of Each Receipt this Period: 125.00
mission

SUBTOTAL of Receipts This Page (optional) ► 2125.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Edward Lifshitz
 Mailing Address 18 White Drive
 City State Zip Code
 Cedarhurst NY 11516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Amper Politziner Mattiac, PC Accountant
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 8 / 2 0 0 9
Transaction ID: SA11AI.25146
 Amount of Each Receipt this Period
 500.00
 membership

B. Full Name (Last, First, Middle Initial)
Nathan J. Lindenbaum
 Mailing Address 464 Winthrop Rd.
 City State Zip Code
 Teaneck NJ 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MGS Corp. Executive
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 2 / 2 0 0 9
Transaction ID: SA11AI.25159
 Amount of Each Receipt this Period
 1800.00
 mission

C. Full Name (Last, First, Middle Initial)
Julie Lobel
 Mailing Address 53 Walnut Court
 City State Zip Code
 Englewood NJ 07631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 n/a Homemaker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 9
Transaction ID: SA11AI.25086
 Amount of Each Receipt this Period
 125.00
 mission

SUBTOTAL of Receipts This Page (optional) ► 2425.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 29 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Edward Lubat
 Mailing Address 155 Chestnut St.
 City Englewood State NJ Zip Code 07631
 Date of Receipt 05 / 10 / 2009
Transaction ID: SA11AI.25087
 Amount of Each Receipt this Period 300.00
 mission
 FEC ID number of contributing federal political committee. C
 Name of Employer Radiology Associates of Ridgewood Occupation Physician
 Receipt For: Primary General Aggregate Year-to-Date 300.00
 Other (specify) ▼

B. Full Name (Last, First, Middle Initial)
Shalom Maidenbaum
 Mailing Address 50 Bayberry Road
 City Lawrence State NY Zip Code 11559
 Date of Receipt 05 / 27 / 2009
Transaction ID: SA11AI.25169
 Amount of Each Receipt this Period 1000.00
 membership
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Attorney
 Receipt For: Primary General Aggregate Year-to-Date 1475.00
 Other (specify) ▼

C. Full Name (Last, First, Middle Initial)
Alisa manniss
 Mailing Address 130 Dorchester Rd.
 City Scarsdale State NY Zip Code 10583
 Date of Receipt 05 / 22 / 2009
Transaction ID: SA11AI.24876
 Amount of Each Receipt this Period 1000.00
 conduit-dan burton
 FEC ID number of contributing federal political committee. C
 Name of Employer self Occupation homemaker
 Receipt For: Primary General
 Other (specify) ▼ **[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial) Barry Mannis		Date of Receipt MM / DD / YYYY 05 / 22 / 2009
Mailing Address 130 Dorchester Rd.		Transaction ID: SA11AI.24875
City Scarsdale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Investor	conduit-dan burton
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial) aaron marks		Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Mailing Address 8 hathaway rd		Transaction ID: SA11AI.24931
City scardale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4800.00
Name of Employer self	Occupation attorney	earmark-harry reid
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

C.

Full Name (Last, First, Middle Initial) aaron marks		Date of Receipt MM / DD / YYYY 05 / 26 / 2009
Mailing Address 8 hathaway rd		Transaction ID: SA11AI.25166
City scardale	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer self	Occupation attorney	membership
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 31 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Joel Maryles
Mailing Address 369 Churchill Rd
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer t-cubed investments llc Occupation investment manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 575.00
Date of Receipt 05 / 10 / 2009
Transaction ID: SA11AI.25088
Amount of Each Receipt this Period 575.00
mission

B. Full Name (Last, First, Middle Initial)
Obie McKenzie
Mailing Address 568 Jones Rd
City Engelwood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Managing Director Occupation Balck Rock
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
Date of Receipt 05 / 28 / 2009
Transaction ID: SA11AI.24886
Amount of Each Receipt this Period 100.00
conduit-evan bayh
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
leon mehl
Mailing Address 28 pine st
City woodmere State NY Zip Code 11598
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation business
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 27 / 2009
Transaction ID: SA11AI.24935
Amount of Each Receipt this Period 250.00
earmark-harry reid

SUBTOTAL of Receipts This Page (optional) ▶ 825.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 32 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
leon mehl

Mailing Address 28 pine st

City State Zip Code
woodmere NY 11598

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

Name of Employer self Occupation business

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 27 / 2009
Transaction ID: SA11AI.25170
Amount of Each Receipt this Period: 250.00
membership

B. Full Name (Last, First, Middle Initial)
Leon Miller

Mailing Address 1320 Trafalgar Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer self Occupation rabbi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 11 / 2009
Transaction ID: SA11AI.25237
Amount of Each Receipt this Period: 350.00
mission

C. Full Name (Last, First, Middle Initial)
Mark Moerdler

Mailing Address 5 Chittendon Rd.

City State Zip Code
Fair Lawn NJ 07410

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

Name of Employer MDY Advanced Technologies Occupation Computer Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 01 / 2009
Transaction ID: SA11AI.25010
Amount of Each Receipt this Period: 300.00
mission

SUBTOTAL of Receipts This Page (optional) ▶ 900.00

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

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

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

FOR LINE NUMBER: PAGE 33 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
David Muschel
Mailing Address 181 East Linden Ave
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Rockview Management Occupation Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 17 / 2009
Transaction ID: SA11AI.24884
Amount of Each Receipt this Period 250.00
earmark-evan bayh

B. Full Name (Last, First, Middle Initial)
David Muschel
Mailing Address 181 East Linden Ave
City Englewood State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Rockview Management Occupation Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2750.00
Date of Receipt 05 / 27 / 2009
Transaction ID: SA11AI.25171
Amount of Each Receipt this Period 2500.00
membership

C. Full Name (Last, First, Middle Initial)
Ira Palgon
Mailing Address 286 churchill rd
City Teaneck State NJ Zip Code 07631
FEC ID number of contributing federal political committee. **C**
Name of Employer Dewey Ballantine Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00
Date of Receipt 05 / 21 / 2009
Transaction ID: SA11AI.25152
Amount of Each Receipt this Period 250.00
membership

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 69

(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Drew Parker

Mailing Address 159 Maple St.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Kingsbrook Investments Real Estate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.25221

Amount of Each Receipt this Period

400.00

mission

B.

Full Name (Last, First, Middle Initial)
maurice pianko

Mailing Address 285 aycrigg ave
3e

City State Zip Code
passaic NJ 07055

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

Name of Employer Occupation
school student

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.25056

Amount of Each Receipt this Period

250.00

mission

C.

Full Name (Last, First, Middle Initial)
Dena Pickholz

Mailing Address 217 Cedar St

City State Zip Code
Engelwood NJ 07631

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

Name of Employer Occupation
Self Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.25123

Amount of Each Receipt this Period

425.00

mission

SUBTOTAL of Receipts This Page (optional)

1075.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 35 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 83 E. Linden Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer JPMorgan Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 06 / 2009

Transaction ID: SA11AI.25042

Amount of Each Receipt this Period 350.00

mission

B. Full Name (Last, First, Middle Initial)
Helene Richin

Mailing Address 72 Old Chimney Rd

City Upper Saddle River State NJ Zip Code 07450

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

Name of Employer Market Associates Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt 05 / 19 / 2009

Transaction ID: SA11AI.24896

Amount of Each Receipt this Period 2000.00

conduit-evan bayh

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Solomon Ross

Mailing Address 76 South Central Ave. Suite 2A

City Valley Stream State NY Zip Code 11598

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

Name of Employer Century Insurance Occupation agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 04 / 2009

Transaction ID: SA11AI.25021

Amount of Each Receipt this Period 300.00

mission

SUBTOTAL of Receipts This Page (optional) ▶ 650.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Norman Rubin

Mailing Address 365 W. Englewood Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 13 / 2009

Transaction ID: SA11AI.25238

Amount of Each Receipt this Period 350.00

mission

B. Full Name (Last, First, Middle Initial)
Avi Samuels

Mailing Address 185 Elm St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Diamond Dealer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 11 / 2009

Transaction ID: SA11AI.25114

Amount of Each Receipt this Period 300.00

mission

C. Full Name (Last, First, Middle Initial)
Eileen Sapadin

Mailing Address 280 Arch Rd

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2009

Transaction ID: SA11AI.25095

Amount of Each Receipt this Period 300.00

mission

SUBTOTAL of Receipts This Page (optional) ► 950.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 320 Ocean Ave

City State Zip Code
Lawrence NY 11559

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

Name of Employer Self Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 05 / 18 / 2009
Transaction ID: SA11AI.25147
Amount of Each Receipt this Period: 2500.00
membership

B. Full Name (Last, First, Middle Initial)
Marty Schlakman

Mailing Address 200 Lyman Pl.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Psychiatry Assoc. Occupation Psychiatrist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 01 / 2009
Transaction ID: SA11AI.25011
Amount of Each Receipt this Period: 300.00
mission

C. Full Name (Last, First, Middle Initial)
Anne Senter

Mailing Address 733 Winthrop Rd

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Self Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 05 / 10 / 2009
Transaction ID: SA11AI.25098
Amount of Each Receipt this Period: 425.00
mission

SUBTOTAL of Receipts This Page (optional) ► 3225.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Marla Shapiro
 Mailing Address 267 Maple St
 City Englewood State NJ Zip Code 07631
 Date of Receipt 05 / 12 / 2009
Transaction ID: SA11AI.25125
 Amount of Each Receipt this Period 300.00
 mission
 FEC ID number of contributing federal political committee. C
 Name of Employer self Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
Helene Sher
 Mailing Address 4 Meadow Lane
 City Lawrence State NY Zip Code 11559
 Date of Receipt 05 / 18 / 2009
Transaction ID: SA11AI.25148
 Amount of Each Receipt this Period 100.00
 membership
 FEC ID number of contributing federal political committee. C
 Name of Employer best efforts used Occupation Office Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 425.00

C. Full Name (Last, First, Middle Initial)
jack shershow
 Mailing Address 437 Beach seven
 City far rockaway State NE Zip Code 11619
 Date of Receipt 05 / 05 / 2009
Transaction ID: SA11AI.25029
 Amount of Each Receipt this Period 300.00
 mission
 FEC ID number of contributing federal political committee. C
 Name of Employer self Occupation md
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 69
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
jack shershow

Mailing Address 437 Beach seven

City far rockaway State NE Zip Code 11619

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

Name of Employer self Occupation md

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 18 / 2009
Transaction ID: SA11AI.25149
 Amount of Each Receipt this Period: 100.00
 membership

B.

Full Name (Last, First, Middle Initial)
Joel Shiff

Mailing Address 59 merrall Dr

City Edison State NJ Zip Code 08817

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 18 / 2009
Transaction ID: SA11AI.25150
 Amount of Each Receipt this Period: 250.00
 membership

C.

Full Name (Last, First, Middle Initial)
Kenneth Shlian

Mailing Address 1206 Central Ave

City Highland Park State NJ Zip Code 08904

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

Name of Employer A&M Industrial Occupation Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 08 / 2009
Transaction ID: SA11AI.25066
 Amount of Each Receipt this Period: 300.00
 mission

SUBTOTAL of Receipts This Page (optional) ▶ 650.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
ari shochet

Mailing Address 290 churchill rd

City State Zip Code
teaneck NJ 07666

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

Name of Employer unemployed Occupation unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
05 / 05 / 2009

Transaction ID: SA11AI.25027

Amount of Each Receipt this Period: 300.00

mission

B. Full Name (Last, First, Middle Initial)
Leah Shteingart

Mailing Address 810 East Lawn Drive

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Frisch Occupation Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: MM / DD / YYYY
05 / 05 / 2009

Transaction ID: SA11AI.25222

Amount of Each Receipt this Period: 275.00

mission

C. Full Name (Last, First, Middle Initial)
Rodger Silverstein

Mailing Address 4 Christopher Ct

City State Zip Code
Montclair NJ 07042

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

Name of Employer Silverstein Ophthomology Occupation MD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: MM / DD / YYYY
05 / 19 / 2009

Transaction ID: SA11AI.24898

Amount of Each Receipt this Period: 250.00

conduit-evan bayh

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 575.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Silverstein Opth. Silverstein Ophthalmologist

Mailing Address 777 Passaic Ave
485

City Clifton State NJ Zip Code 07012

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

Name of Employer LLC Occupation LLC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 05 / 19 / 2009
Transaction ID: SA11AI.24900
 Amount of Each Receipt this Period: 250.00
 conduit-ewan bayh
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
susan sippelle

Mailing Address 155 lincoln St

City englewood State NJ Zip Code 07631

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

Name of Employer n/a Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 05 / 19 / 2009
Transaction ID: SA11AI.24902
 Amount of Each Receipt this Period: 500.00
 conduit-ewan bayh
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Norman Sohn

Mailing Address 197 Maple St.

City Englewood State NJ Zip Code 07631

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

Name of Employer Somerset Surgical Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt: 06 / 01 / 2009
Transaction ID: SA11AI.24989
 Amount of Each Receipt this Period: 100.00
 conduit-eric cantor
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 0.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 69

(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial)
Tammy Spielman

Mailing Address 405 Eastwood Court

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
IRX Therapeutics, Inc. Controller

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.25100

Amount of Each Receipt this Period

300.00

mission

B.

Full Name (Last, First, Middle Initial)
Steven Starkman

Mailing Address 267 Robin Rd.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
eyecare plus physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.25248

Amount of Each Receipt this Period

125.00

mission

C.

Full Name (Last, First, Middle Initial)
Sheldon Stein

Mailing Address 49 Regent St.

City State Zip Code
Bergenfield NJ 07621

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

Name of Employer Occupation
Ithaca Construction Builder

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.25031

Amount of Each Receipt this Period

250.00

mission

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Ronnie Stern

Mailing Address 514 Maitland Ave.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Wythe Upholstery Co. Furniture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2009

Transaction ID: SA11AI.25116

Amount of Each Receipt this Period
425.00

mission

B. Full Name (Last, First, Middle Initial)
Miriam Stiefel

Mailing Address 280 Starling Rd.

City State Zip Code
Englewood NJ 07631

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

Name of Employer Occupation
Hudson Energy Services Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2009

Transaction ID: SA11AI.25236

Amount of Each Receipt this Period
250.00

mission

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

Mailing Address 287 Rutland Rd.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Self Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
05 / 10 / 2009

Transaction ID: SA11AI.25101

Amount of Each Receipt this Period
125.00

mission

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
hector torres
Mailing Address 1 Dogwood Ln
City State Zip Code
sands point NY 11050
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00
Date of Receipt 05 / 26 / 2009
Transaction ID: SA11AI.24933
Amount of Each Receipt this Period 4800.00
earmark-harry reid

B. Full Name (Last, First, Middle Initial)
hector torres
Mailing Address 1 Dogwood Ln
City State Zip Code
sands point NY 11050
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 05 / 26 / 2009
Transaction ID: SA11AI.25167
Amount of Each Receipt this Period 200.00
membership

C. Full Name (Last, First, Middle Initial)
David Weinstein
Mailing Address 741 Washburn St
City State Zip Code
Teaneck NJ 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Lincoln Equities group Occupation R.E. Exec.
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 05 / 11 / 2009
Transaction ID: SA11AI.25117
Amount of Each Receipt this Period 300.00
mission

SUBTOTAL of Receipts This Page (optional) ► 5300.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A.

Full Name (Last, First, Middle Initial) David Weinstock		Date of Receipt MM / DD / YYYY 05 / 18 / 2009
Mailing Address 253 Broadway		Transaction ID: SA11AI.24926
City Lynbrook	State NY	Zip Code 11563
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lynbrook Cardiology	Occupation MD	earmark-harry reid
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.

Full Name (Last, First, Middle Initial) Robert Wind		Date of Receipt MM / DD / YYYY 05 / 11 / 2009
Mailing Address 276 Warwick Ave.		Transaction ID: SA11AI.25118
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer Self	Occupation Dentist	mission
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	525.00
TOTAL This Period (last page this line number only)	75872.90

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 69
	(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 type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Fidelity Investments		Date of Receipt
	Mailing Address 396 Route 17 North		<input type="text" value="05"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Paramus	NJ	07652
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.25262
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1295.84"/>	<input type="text" value="180.19"/>
			dividends received

B.	Full Name (Last, First, Middle Initial) Valley National Bank		Date of Receipt
	Mailing Address 1445 Valley Rd		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wayne	NJ	07470
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: SA17.25265
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1753.02"/>	<input type="text" value="11.09"/>
			interest

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="191.28"/>
TOTAL This Period (last page this line number only)	<input type="text" value="191.28"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 47 / 69

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) 5 Towns Jewish Times	Transaction ID: SB21B.25178 Date of Disbursement																			
	Mailing Address PO Box 690	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	7		2	0	0	9												
	City Lawrence State NY Zip Code 11559	Amount of Each Disbursement this Period																			
	Purpose of Disbursement mission advertising	<table border="1"><tr><td>400.00</td></tr></table>	400.00																		
400.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) 5 Towns Jewish Times	Transaction ID: SB21B.25194 Date of Disbursement																			
	Mailing Address PO Box 690	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	1		2	0	0	9												
	City Lawrence State NY Zip Code 11559	Amount of Each Disbursement this Period																			
	Purpose of Disbursement mission advertising	<table border="1"><tr><td>400.00</td></tr></table>	400.00																		
400.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) All Stage & Sound Inc	Transaction ID: SB21B.25205 Date of Disbursement																			
	Mailing Address 21500 Laytonsville Road	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	0	9												
	City Laytonsville State MD Zip Code 20882	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Staging & Audio for mission	<table border="1"><tr><td>2488.56</td></tr></table>	2488.56																		
2488.56																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3288.56</td></tr></table>	3288.56
3288.56		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

PAGE 48 / 69

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Mindy Berman	Transaction ID: SB21B.25211
	Mailing Address 312 Cedar Ave	Date of Disbursement MM / DD / YYYY 05 / 11 / 2009
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period 633.84
	Purpose of Disbursement payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mindy Berman	Transaction ID: SB21B.25207
	Mailing Address 312 Cedar Ave	Date of Disbursement MM / DD / YYYY 05 / 22 / 2009
	City Highland Park State NJ Zip Code 08904	Amount of Each Disbursement this Period 975.22
	Purpose of Disbursement payroll Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Coach USA	Transaction ID: SB21B.25199
	Mailing Address 160 South Rt 17 North	Date of Disbursement MM / DD / YYYY 05 / 12 / 2009
	City Paramus State NJ Zip Code 07652	Amount of Each Disbursement this Period 11700.00
	Purpose of Disbursement buses for mission Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	13309.06
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
Rachel Druck

Mailing Address 41 Cape May St

City Englewood State NJ Zip Code 07631

Purpose of Disbursement staples reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.25202
Date of Disbursement: 05 / 18 / 2009

Amount of Each Disbursement this Period: 569.78

Category/Type: 001

B. Full Name (Last, First, Middle Initial)
Jewish Media Group LLC

Mailing Address 5455 Wilshire Blvd Suite # 1000

City Los Angelis State NY Zip Code 90036

Purpose of Disbursement mission advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.25177
Date of Disbursement: 05 / 07 / 2009

Amount of Each Disbursement this Period: 471.90

Category/Type: 004

C. Full Name (Last, First, Middle Initial)
Jewish Media Group LLC

Mailing Address 5455 Wilshire Blvd Suite # 1000

City Los Angelis State NY Zip Code 90036

Purpose of Disbursement mission advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.25195
Date of Disbursement: 05 / 11 / 2009

Amount of Each Disbursement this Period: 471.90

Category/Type: 004

SUBTOTAL of Disbursements This Page (optional) ► 1513.58

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A. Full Name (Last, First, Middle Initial) Monsey Tours</p> <p>Mailing Address 870 Dean St</p> <p>City Brooklyn State NY Zip Code 11238</p> <p>Purpose of Disbursement mission buses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25204</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24590.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) NJ Jewish News</p> <p>Mailing Address 901 Route 10</p> <p>City Whippany State NJ Zip Code 07981</p> <p>Purpose of Disbursement advertising mission</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25176</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="930.00"/></p> <p>Category/Type: <input type="text" value="004"/></p>
<p>C. Full Name (Last, First, Middle Initial) Leonor Nunez</p> <p>Mailing Address 526 Longview Ave</p> <p>City Cliffside Park State NJ Zip Code 07010</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25181</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="431.21"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25182</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="99.19"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement invoice</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25190</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="90.75"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 1551 S. Washington Ave.</p> <p>City Piscataway State NJ Zip Code 08854</p> <p>Purpose of Disbursement Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25192</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="139.66"/></p> <p><input type="text" value="001"/> Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

329.60

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.25193
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 11 / 2009
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 386.77
	Purpose of Disbursement Invoice	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:	

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.25212
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 11 / 2009
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 599.26
	Purpose of Disbursement taxes	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:	

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB21B.25208
	Mailing Address 1551 S. Washington Ave.	Date of Disbursement 05 / 22 / 2009
	City Piscataway State NJ Zip Code 08854	Amount of Each Disbursement this Period 1564.84
	Purpose of Disbursement taxes	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)	2550.87
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A. Full Name (Last, First, Middle Initial) paypal</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25263</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="592.71"/></p>
<p>B. Full Name (Last, First, Middle Initial) Karen Pichkhadze</p> <p>Mailing Address 1038 Kingsland Lane</p> <p>City Fort Lee State NJ Zip Code 07024</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25191</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1450.49"/></p>
<p>C. Full Name (Last, First, Middle Initial) Karen Pichkhadze</p> <p>Mailing Address 1038 Kingsland Lane</p> <p>City Fort Lee State NJ Zip Code 07024</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.25206</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2319.62"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Postmaster, Englewood Annex	Transaction ID: SB21B.25198 Date of Disbursement
	Mailing Address 55 Smith St	<input type="text" value="05"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Englewood State NJ Zip Code 07631	Amount of Each Disbursement this Period
	Purpose of Disbursement P.O. Box renewal fee	<input type="text" value="250.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.25201 Date of Disbursement
	Mailing Address 461-469 West St	<input type="text" value="05"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Fort Lee State NJ Zip Code 07024	Amount of Each Disbursement this Period
	Purpose of Disbursement mission-printing	<input type="text" value="521.63"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Valley National Bank	Transaction ID: SB21B.25264 Date of Disbursement
	Mailing Address 1445 Valley Rd	<input type="text" value="05"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Wayne State NJ Zip Code 07470	Amount of Each Disbursement this Period
	Purpose of Disbursement merchant fee	<input type="text" value="681.72"/>
	Candidate Name	<input type="text" value=""/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1453.35"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 / 69

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Verizon wireless		Transaction ID: SB21B.25179	
	Mailing Address PO Box 17120		Date of Disbursement 05 / 01 / 2009	
	City Tucson	State AZ	Zip Code 85731	Amount of Each Disbursement this Period 123.16
	Purpose of Disbursement cell phones		001	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	123.16
TOTAL This Period (last page this line number only)	▶	52882.21

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24906 Date of Disbursement 05 / 17 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 500.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement earmark-reuven escott	Category/Type
	Candidate Name EVAN BAYH	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24907 Date of Disbursement 05 / 17 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 250.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement earmark-david muschel	Category/Type
	Candidate Name EVAN BAYH	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24909 Date of Disbursement 05 / 19 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 1000.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement earmark-michael granoff	Category/Type
	Candidate Name EVAN BAYH	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A. Full Name (Last, First, Middle Initial) EVAN BAYH</p> <p>Mailing Address 10 W MARKET SUITE 2000</p> <p>City INDIANAPOLIS State IN Zip Code 46204</p> <p>Purpose of Disbursement conduit-danny feuer</p> <p>Candidate Name EVAN BAYH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24916 Date of Disbursement: 05 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) EVAN BAYH</p> <p>Mailing Address 10 W MARKET SUITE 2000</p> <p>City INDIANAPOLIS State IN Zip Code 46204</p> <p>Purpose of Disbursement conduit-eleanor klein</p> <p>Candidate Name EVAN BAYH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24919 Date of Disbursement: 05 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) EVAN BAYH</p> <p>Mailing Address 10 W MARKET SUITE 2000</p> <p>City INDIANAPOLIS State IN Zip Code 46204</p> <p>Purpose of Disbursement conduit-helene richin</p> <p>Candidate Name EVAN BAYH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24920 Date of Disbursement: 05 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24921 Date of Disbursement 05 / 19 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 250.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement conduit-rodger silverstein	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24922 Date of Disbursement 05 / 19 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 250.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement conduit-silverstein ophthomology	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24923 Date of Disbursement 05 / 19 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 500.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement conduit-susan sipprelle	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	[MEMO ITEM]

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.25215 Date of Disbursement 05 / 19 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 250.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement conduit-charlie hong	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24910 Date of Disbursement 05 / 27 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 2000.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement earmark-jack halpern	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	

C.	Full Name (Last, First, Middle Initial) EVAN BAYH	Transaction ID: SB23.24911 Date of Disbursement 05 / 27 / 2009
	Mailing Address 10 W MARKET SUITE 2000	Amount of Each Disbursement this Period 5000.00
	City INDIANAPOLIS State IN Zip Code 46204	
	Purpose of Disbursement norpac donation	
	Candidate Name EVAN BAYH	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 00	

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
EVAN BAYH

Mailing Address 10 W MARKET SUITE 2000

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement norpac donation

Candidate Name EVAN BAYH

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: IN District: 00

Transaction ID: SB23.25740
Date of Disbursement: 05 / 27 / 2009

Amount of Each Disbursement this Period: 5000.00

Category/Type

B. Full Name (Last, First, Middle Initial)
EVAN BAYH

Mailing Address 10 W MARKET SUITE 2000

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement conduit-obie mckenszie

Candidate Name EVAN BAYH

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: IN District: 00

Transaction ID: SB23.24914
Date of Disbursement: 05 / 28 / 2009

Amount of Each Disbursement this Period: 100.00

Category/Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
EVAN BAYH

Mailing Address 10 W MARKET SUITE 2000

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement conduit-oscar echman

Candidate Name EVAN BAYH

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: IN District: 00

Transaction ID: SB23.24915
Date of Disbursement: 05 / 28 / 2009

Amount of Each Disbursement this Period: 250.00

Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

<p>A. Full Name (Last, First, Middle Initial) EVAN BAYH</p> <p>Mailing Address 10 W MARKET SUITE 2000</p> <p>City INDIANAPOLIS State IN Zip Code 46204</p> <p>Purpose of Disbursement conduit-leon kozak</p> <p>Candidate Name EVAN BAYH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24924 Date of Disbursement 05 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DANNY L BURTON</p> <p>Mailing Address 12141 E 79TH ST</p> <p>City INDPLS State IN Zip Code 46236</p> <p>Purpose of Disbursement earmark-david albalah</p> <p>Candidate Name DANNY L BURTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24869 Date of Disbursement 05 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C. Full Name (Last, First, Middle Initial) DANNY L BURTON</p> <p>Mailing Address 12141 E 79TH ST</p> <p>City INDPLS State IN Zip Code 46236</p> <p>Purpose of Disbursement earmark-rob gottesman</p> <p>Candidate Name DANNY L BURTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.24878 Date of Disbursement 05 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 150.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

400.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) DANNY L BURTON	Transaction ID: SB23.24879 Date of Disbursement 05 / 22 / 2009
	Mailing Address 12141 E 79TH ST	Amount of Each Disbursement this Period 500.00
	City INDPLS State IN Zip Code 46236	
	Purpose of Disbursement earmark-mort fridman	Category/ Type
	Candidate Name DANNY L BURTON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 05	

B.	Full Name (Last, First, Middle Initial) DANNY L BURTON	Transaction ID: SB23.24880 Date of Disbursement 05 / 22 / 2009
	Mailing Address 12141 E 79TH ST	Amount of Each Disbursement this Period 1000.00
	City INDPLS State IN Zip Code 46236	
	Purpose of Disbursement earmark-kevin lemmer	Category/ Type
	Candidate Name DANNY L BURTON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 05	

C.	Full Name (Last, First, Middle Initial) DANNY L BURTON	Transaction ID: SB23.24882 Date of Disbursement 05 / 22 / 2009
	Mailing Address 12141 E 79TH ST	Amount of Each Disbursement this Period 5000.00
	City INDPLS State IN Zip Code 46236	
	Purpose of Disbursement norpac donation	Category/ Type
	Candidate Name DANNY L BURTON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IN District: 05	

SUBTOTAL of Disbursements This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial)
DANNY L BURTON

Mailing Address 12141 E 79TH ST

City INDPLS State IN Zip Code 46236

Purpose of Disbursement conduit-barry mannis

Candidate Name DANNY L BURTON

Office Sought: House Senate President
State: IN District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.25218
Date of Disbursement 05 / 22 / 2009

Amount of Each Disbursement this Period 1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DANNY L BURTON

Mailing Address 12141 E 79TH ST

City INDPLS State IN Zip Code 46236

Purpose of Disbursement conduit-alisa mannis

Candidate Name DANNY L BURTON

Office Sought: House Senate President
State: IN District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.25219
Date of Disbursement 05 / 22 / 2009

Amount of Each Disbursement this Period 1000.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
FRIENDS FOR HARRY REID

Mailing Address PO BOX 85223

City LAS VEGAS State NV Zip Code 89185

Purpose of Disbursement earmark-murray forman

Candidate Name FRIENDS FOR HARRY REID

Office Sought: House Senate President
State: NV District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.24939
Date of Disbursement 05 / 18 / 2009

Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ► 1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID	Transaction ID: SB23.24941 Date of Disbursement 05 / 27 / 2009
	Mailing Address PO BOX 85223	
	City LAS VEGAS State NV Zip Code 89185	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement earmark-david weinstock	
	Candidate Name FRIENDS FOR HARRY REID	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID	Transaction ID: SB23.24942 Date of Disbursement 05 / 27 / 2009
	Mailing Address PO BOX 85223	
	City LAS VEGAS State NV Zip Code 89185	Amount of Each Disbursement this Period 4800.00
	Purpose of Disbursement earmark-david friedman	
	Candidate Name FRIENDS FOR HARRY REID	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID	Transaction ID: SB23.24943 Date of Disbursement 05 / 27 / 2009
	Mailing Address PO BOX 85223	
	City LAS VEGAS State NV Zip Code 89185	Amount of Each Disbursement this Period 4800.00
	Purpose of Disbursement earmark-marc kasowitz	
	Candidate Name FRIENDS FOR HARRY REID	Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	9850.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 69

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 85223 City LAS VEGAS State NV Zip Code 89185 Purpose of Disbursement earmark-aaron marks Candidate Name FRIENDS FOR HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24944 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">4800.00</div>
B.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 85223 City LAS VEGAS State NV Zip Code 89185 Purpose of Disbursement earmark-hector torres Candidate Name FRIENDS FOR HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24945 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">4800.00</div>
C.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 85223 City LAS VEGAS State NV Zip Code 89185 Purpose of Disbursement earmark-leon mehl Candidate Name FRIENDS FOR HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24946 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9 Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">250.00</div>

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 5px;">9850.00</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID Mailing Address PO BOX 85223 City LAS VEGAS State NV Zip Code 89185 Purpose of Disbursement norpac donation Candidate Name FRIENDS FOR HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24947 Date of Disbursement 05 / 27 / 2009 Amount of Each Disbursement this Period 3000.00
B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln Mailing Address 303 massachusetts ave 3rd fl City washington State DC Zip Code 20002 Purpose of Disbursement earmark-alan berger Candidate Name Friends of Blanche Lincoln Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24859 Date of Disbursement 05 / 01 / 2009 Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln Mailing Address 303 massachusetts ave 3rd fl City washington State DC Zip Code 20002 Purpose of Disbursement norpac donation Candidate Name Friends of Blanche Lincoln Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25173 Date of Disbursement 05 / 01 / 2009 Amount of Each Disbursement this Period 2800.00

SUBTOTAL of Disbursements This Page (optional)	6050.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln <hr/> Mailing Address 303 massachusetts ave 3rd fl <hr/> City washington State DC Zip Code 20002 <hr/> Purpose of Disbursement earmark-esther chouake <hr/> Candidate Name Friends of Blanche Lincoln <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25213 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln <hr/> Mailing Address 303 massachusetts ave 3rd fl <hr/> City washington State DC Zip Code 20002 <hr/> Purpose of Disbursement earmark-mort fridman <hr/> Candidate Name Friends of Blanche Lincoln <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.25214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln <hr/> Mailing Address 303 massachusetts ave 3rd fl <hr/> City washington State DC Zip Code 20002 <hr/> Purpose of Disbursement earmark-leon kozak <hr/> Candidate Name Friends of Blanche Lincoln <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.24862 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: SB23.24864 Date of Disbursement
	Mailing Address 303 massachusetts ave 3rd fl	<input type="text" value="05"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement norpac donation	<input type="text" value="1000.00"/>
	Candidate Name Friends of Blanche Lincoln	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln	Transaction ID: SB23.24867 Date of Disbursement
	Mailing Address 303 massachusetts ave 3rd fl	<input type="text" value="05"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement earmark-jack halpern	<input type="text" value="1000.00"/>
	Candidate Name Friends of Blanche Lincoln	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER	Transaction ID: SB23.25187 Date of Disbursement
	Mailing Address 60 MADISON AVE SUITE 1026	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City NEW YORK State NY Zip Code 10010	Amount of Each Disbursement this Period
	Purpose of Disbursement earmark-jack rosen	<input type="text" value="1000.00"/>
	Candidate Name FRIENDS OF SCHUMER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="52400.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

A. Full Name (Last, First, Middle Initial) Daniel Mondrow <hr/> Mailing Address 280 Main St. <hr/> City Metuchen State NJ Zip Code 08840 <hr/> Purpose of Disbursement refund-mission Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.25007 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00
B. Full Name (Last, First, Middle Initial) raymond verhoeff <hr/> Mailing Address 20 dakota ct <hr/> City suffern State NY Zip Code 10901 <hr/> Purpose of Disbursement refund-mission Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB28A.25002 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 125.00

SUBTOTAL of Disbursements This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	250.00