

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For 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  
SCOTT GARRETT FOR CONGRESS

ADDRESS (number and street) P.O. Box 905  
 Check if different than previously reported. (ACC)  
Newton NJ 07860

2. **FEC IDENTIFICATION NUMBER** C00386110  
**CITY** **STATE** **ZIP CODE**  
STATE DISTRICT  
NJ 05  
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 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on in the State of  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 04 2008 in the State of NJ

5. Covering Period 10 16 2008 through 11 24 2008

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 Steven J. Ysais

Signature of Treasurer Electronically Filed by Steven J. Ysais Date 01 22 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

SCOTT GARRETT FOR CONGRESS

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	200571.36	1532881.88
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5400.96
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	200571.36	1527480.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	560704.77	1724985.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	13644.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	560704.77	1711341.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	50851.54	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED  
SUMMARY PAGE**  
Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name  
SCOTT GARRETT FOR CONGRESS

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

**I. RECEIPTS**

	<b>COLUMN B</b> Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><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>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	<b>COLUMN C</b> Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><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>8</td></tr></table> (date after general election)  through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><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>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
114978.86	794330.70	1500.00																																																
(ii) Unitemized																																																		
22992.50	155558.27	550.00																																																
(iii) Total of contributions from individuals																																																		
137971.36	949888.97	2050.00																																																
(b) Political Party Committees																																																		
5000.00	5000.00	0.00																																																
(c) Other Political Committees																																																		
57600.00	577992.91	0.00																																																

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
200571.36	1532881.88	2050.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	13644.75	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
200571.36	1546526.63	2050.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

SCOTT GARRETT FOR CONGRESS

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
560704.77	1724985.98	33620.12
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	5400.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	0.96	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

0.00	5400.96	0.00
------	---------	------

21. OTHER DISBURSEMENTS

0.00	15595.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

560704.77	1745981.94	33620.12
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

200571.36	1527480.92	2050.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

560704.77	1711341.23	33620.12
-----------	------------	----------

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....	410984.95
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	200571.36
25. SUBTOTAL(add Line 23 and Line 24) .....	611556.31
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	560704.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	50851.54

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

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

FOR LINE NUMBER: PAGE 7 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ken Abramowitz

Mailing Address 411 Harbor Rd

City State Zip Code  
Southport CT 06890

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NGN Capital Healthcare Venture Capital

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

**Transaction ID:** SA11AI.14221

Amount of Each Receipt this Period  
250.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dr. Philip Affuso, M.D.

Mailing Address 255 Lotte Rd

City State Zip Code  
Ridgewood NJ 07450

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Virologic Specialities Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

**Transaction ID:** SA11AI.12904

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Raanan Agus

Mailing Address 170 E 87th St Apt E8e

City State Zip Code  
New York NY 10128

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Goldman Sachs & Co. Finance

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.12907

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1350.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. James R. Allen

Mailing Address 89a Allen Rd  
Allenholm Farm

City Hackettstown State NJ Zip Code 07840

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

Name of Employer Retired - Allenholm Farm Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt MM / DD / YYYY  
10 / 21 / 2008

**Transaction ID:** SA11AI.12913

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. K. Tucker Andersen

Mailing Address 61 Above All Rd

City Warren State CT Zip Code 06754

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

Name of Employer Cumberland Associates Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt MM / DD / YYYY  
10 / 30 / 2008

**Transaction ID:** SA11AI.14225

Amount of Each Receipt this Period  
1000.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. James P. Ayers

Mailing Address 9 Kymer Rd

City Branchville State NJ Zip Code 07826

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

Name of Employer Franklin Mutual Insurance Occupation Insurance Sales

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt MM / DD / YYYY  
10 / 21 / 2008

**Transaction ID:** SA11AI.12924

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1150.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 154  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Carol A. Baratta

Mailing Address 775 Peach Tree Ln

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation  
Self Employed Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2008

**Transaction ID:** SA11AI.12930

Amount of Each Receipt this Period  
30.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

223.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David R. Bentson

Mailing Address 472 Oakland Ave Fl 2

City State Zip Code  
Staten Island NY 10310

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

Name of Employer Occupation  
Allen C. Bentson Agency, Inc. Partner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2008

**Transaction ID:** SA11AI.12945

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Dean Bernocchi

Mailing Address 776 Quinton Ave

City State Zip Code  
Trenton NJ 08629

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

Name of Employer Occupation  
Keane Inc. Computer Programmer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2008

**Transaction ID:** SA11AI.12949

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

2300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2430.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Bineau

Mailing Address 9 Boonton Ave

City State Zip Code  
Boonton NJ 07005

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Farmbrook Realty Inc. Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

**Transaction ID:** SA11AI.12951

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. James Quentin Bonanno

Mailing Address 14 Warewoods Rd

City State Zip Code  
Saddle River NJ 07458

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	7	/	2	0	0	8

**Transaction ID:** SA11AI.12958

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gerard Bosse

Mailing Address PO Box 299

City State Zip Code  
Augusta NJ 07822

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

550.00

Date of Receipt  

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

**Transaction ID:** SA11AI.12962

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1200.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. William W. Boyd

Mailing Address PO Box 1147

City State Zip Code  
Tallahassee FL 32302

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

Name of Employer Retired Occupation Retired-Mechanical Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
250.00

Transaction ID: SA11AI.12964

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William W. Boyd

Mailing Address PO Box 1147

City State Zip Code  
Tallahassee FL 32302

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

Name of Employer Retired Occupation Retired-Mechanical Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
250.00

Transaction ID: SA11AI.12965

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. William J. Brennan

Mailing Address 82 Devonshire Rd

City State Zip Code  
Cedar Grove NJ 07009

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
100.00

Transaction ID: SA11AI.12970

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Judith Butcher		Date of Receipt
	Mailing Address PO Box 186		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Stillwater	NJ	07875
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.12978
Name of Employer Frederick Butcher & Co.		Occupation CPA/Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Edna Cadillac		Date of Receipt
	Mailing Address 714 Park Vw		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Pompton Plains	NJ	07444
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.12982
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Ralph J. Calabrese		Date of Receipt
	Mailing Address 39 Greenbriar Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Berkeley Heights	NJ	07922
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.12984
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 300.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Evelyn Campbell

Mailing Address 131 Jefferson Ave

City State Zip Code  
Cresskill NJ 07626

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.12988

Amount of Each Receipt this Period

25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Saverio V. Cereste

Mailing Address PO Box 845

City State Zip Code  
Fort Lee NJ 07024

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 252.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.14039

Amount of Each Receipt this Period

252.00

In-kind - food and beverage  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Albino J. Cerqueira

Mailing Address 300 Wilson Ave

City State Zip Code  
Newark NJ 07105

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

Name of Employer Self Employed Occupation Contractor

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.12999

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1277.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Norman Chambers

Mailing Address 99 N Post Oak Ln Apt 1106

City State Zip Code  
Houston TX 77024

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

Name of Employer Occupation  
NCI CEO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11AI.14245

Amount of Each Receipt this Period  
250.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Fred J. Chemidlin, Jr.

Mailing Address 917 Tice Pl

City State Zip Code  
Westfield NJ 07090

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

Name of Employer Occupation  
Family Investors Company Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 8

**Transaction ID:** SA11AI.13003

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephen Cohen

Mailing Address 24 Fox Den Rd

City State Zip Code  
Mount Kisco NY 10549

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

Name of Employer Occupation  
Elliott Associates Trader

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13026

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Mary Anne Condit		Date of Receipt
	Mailing Address 1 Windy Brow Mnr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 17 / 2008
	City	State	Zip Code
	Newton	NJ	07860
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13032
Name of Employer Retired Condit Ford		Occupation Retired Owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Albert L. Connelly		Date of Receipt
	Mailing Address 49 Channing Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 27 / 2008
	City	State	Zip Code
	Ringwood	NJ	07456
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13033
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Arthur W. Conway		Date of Receipt
	Mailing Address 311 Algonquin Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 28 / 2008
	City	State	Zip Code
	Franklin Lakes	NJ	07417
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13041
Name of Employer DialAmerica		Occupation President/CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>2650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)

Mr. William Conway

Mailing Address PO Box 668

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt

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

Transaction ID: SA11AI.13042

Amount of Each Receipt this Period

2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Mr. Douglas W. Cooper

Mailing Address 264 East Dr

City State Zip Code  
Walden NY 12586

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

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

Transaction ID: SA11AI.13044

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mrs. Bernadien Wynn Crosby

Mailing Address 117 Siddle Dr

City State Zip Code  
Cody WY 82414

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.13052

Amount of Each Receipt this Period

200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2600.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ravenel B. Curry, III

Mailing Address 499 Park Ave Fl 17

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Eagle Capital Investment Management

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2008

**Transaction ID:** SA11AI.14264

Amount of Each Receipt this Period  
1000.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Philip Deacon

Mailing Address 99 Demarest Rd

City State Zip Code  
Sparta NJ 07871

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

Name of Employer Occupation  
Deacon Development Corp Builder

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2008

**Transaction ID:** SA11AI.13063

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dr. W. T.S. De Alwis, M.D.

Mailing Address 17 Berkery Place

City State Zip Code  
Alpine NJ 07620

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 16 / 2008

**Transaction ID:** SA11AI.13062

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andrew J. Demes

Mailing Address 62 E Grand Ave

City Montvale State NJ Zip Code 07645

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: SA11AI.13066  
Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gerald F. DeSimone

Mailing Address 170 Lincoln Ave

City Ridgewood State NJ Zip Code 07450

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3525.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.13070  
Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Mary Dickman

Mailing Address 239 Devon Rd

City Tenafly State NJ Zip Code 07670

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt: 10 / 21 / 2008  
Transaction ID: SA11AI.13075  
Amount of Each Receipt this Period: 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Wayne F. Dietz	Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address PO Box 2099	<b>Transaction ID:</b> SA11AI.13077
	City State Zip Code Branchville NJ 07826	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Dietz and Hammer Occupation President Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2079.43	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Stephen Dizard	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 351 W Broadway # 2	<b>Transaction ID:</b> SA11AI.13079
	City State Zip Code New York NY 10013	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Wood Capital Partners Occupation Consultant Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gerald S. Dowling	Date of Receipt MM / DD / YYYY 10 / 20 / 2008
	Mailing Address PO Box 2	<b>Transaction ID:</b> SA11AI.13081
	City State Zip Code Oldwick NJ 08858	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired (State Farm Ins.) Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 154  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Rita E. Duenas

Mailing Address 23 Empress Ct

City Freehold State NJ Zip Code 07728

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

Name of Employer Church & Dwight Co., Inc Occupation Chemist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2008  
Transaction ID: SA11AI.13086  
Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lewis M. Eisenberg

Mailing Address 82 W River Rd

City Rumson State NJ Zip Code 07760

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

Name of Employer Granite Capital, Inc Occupation Partner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2008  
Transaction ID: SA11AI.13095  
Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bernard J. Ellis

Mailing Address 400 E Ridgewood Ave Apt 7a

City Ridgewood State NJ Zip Code 07450

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 508.00

Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.13097  
Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. James P. Fabiani

Mailing Address 1101 Pennsylvania Ave NW Ste 700

City Washington State DC Zip Code 20004

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

Name of Employer Fabiani & Company Occupation Chairman and CEO

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 11 / 03 / 2008  
**Transaction ID:** SA11AI.13106  
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gerald F. Fabiano

Mailing Address PO Box 130

City Rockaway State NJ Zip Code 07866

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

Name of Employer Polyfil Corporation Occupation President

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID:** SA11AI.13107  
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Samuel J. Faiello

Mailing Address 7 Sandy Ridge Rd

City Stockton State NJ Zip Code 08559

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

Name of Employer Share Water Co. Occupation Public Relations Exec.

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2008  
**Transaction ID:** SA11AI.13108  
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2900.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Farina

Mailing Address 9 Mount Bethel Rd

City State Zip Code  
Hackettstown NJ 07840

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

Name of Employer Occupation  
Picatinny Arsenal, NJ Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.13109

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence C. Farrell, Jr.

Mailing Address 223 Ashland Rd

City State Zip Code  
Summit NJ 07901

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

Name of Employer Occupation  
None Disabled

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13110

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dr. Ganepola Ganepola

Mailing Address 64 Alpine Ter

City State Zip Code  
Hillsdale NJ 07642

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

Name of Employer Occupation  
Self MD Surgeon

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.13140

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Andrew M. Gause

Mailing Address 521 Lafayette Ave

City State Zip Code  
Hawthorne NJ 07506

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

Name of Employer Occupation  
Self Employed Author

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.13144

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. C.H. Coster Gerard

Mailing Address 515 Madison Ave #32

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Gerard & Hewes Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.13145

Amount of Each Receipt this Period  
350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Sander Gerber

Mailing Address 441 W End Ave, Apt 9A

City State Zip Code  
New York NY 10024

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

Name of Employer Occupation  
Hudson Bay Capital Hedge Fund Founder

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.13146

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 154  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Cindy Gewecke

Mailing Address 20 Center St

City Branchville State NJ Zip Code 07826

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

Name of Employer: KG Builders/Building Systems Mgmt Occupation: Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 04 / 2008  
Transaction ID: SA11AI.13148  
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ms. Pam Gillespie

Mailing Address PO Box 968

City Melbourne State FL Zip Code 32902

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

Name of Employer: Friends of Dave Weldon Occupation: Deputy District Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 21 / 2008  
Transaction ID: SA11AI.13151  
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Honorable John P. Ginty, Esq.

Mailing Address 30 Corsa Ter Apt 2b

City Ridgewood State NJ Zip Code 07450

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

Name of Employer: Self Employed Occupation: Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1800.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.13152  
Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2100.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 154  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Elliot Greenberg

Mailing Address 35 Winding Brook Rd

City State Zip Code  
New Rochelle NY 10804

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

Name of Employer Occupation  
Elliott Associates Director

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11AI.13163

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Robert H. Grieser, Jr.

Mailing Address 100 E Liberty Ave

City State Zip Code  
Hillsdale NJ 07642

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

Name of Employer Occupation  
US Military Academy Instructor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11AI.13165

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

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

Mailing Address 136 E Stevens Ave

City State Zip Code  
Wyckoff NJ 07481

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13167

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lincoln Griswold

Mailing Address 364 Founders Vlg

City Lansdale State PA Zip Code 19446

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

Name of Employer Special Care Inc. Occupation Chairman

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2008  
**Transaction ID:** SA11AI.14287  
 Amount of Each Receipt this Period 500.00  
 Conduit: Club for Growth  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wesley Grow

Mailing Address 248 Mineral St

City Pottstown State PA Zip Code 19464

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2008  
**Transaction ID:** SA11AI.14289  
 Amount of Each Receipt this Period 1000.00  
 Conduit: Club for Growth  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence Gubler

Mailing Address 575 Farview Ave

City Wyckoff State NJ Zip Code 07481

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

Name of Employer Meehan & Associates Occupation Accountant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2008  
**Transaction ID:** SA11AI.13173  
 Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Abina Haffner

Mailing Address 631 Plum Ter

City State Zip Code  
Mahwah NJ 07430

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

Name of Employer Occupation  
I.M.S. Health Lead Analyst

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.13180

Amount of Each Receipt this Period

50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Hon. Gordon R. Hamm

Mailing Address 35 Paddock Rd

City State Zip Code  
Ho Ho Kus NJ 07423

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

Name of Employer Occupation  
Garage Management Association Owner-Parking Garages

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.13187

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter O. Hanson

Mailing Address 90 Prospect Ave

City State Zip Code  
Hackensack NJ 07601

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

Name of Employer Occupation  
James E. Hanson Inc. Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

Date of Receipt

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

Transaction ID: SA11AI.13192

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2050.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Angela Haverly  
Mailing Address 24 Mosswood Trl  
City Denville State NJ Zip Code 07834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 950.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.13197  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dr. Robert Herpst  
Mailing Address 11 Trotters Ln  
City Mahwah State NJ Zip Code 07430  
FEC ID number of contributing federal political committee. **C**  
Name of Employer International Crystal Labs Occupation Executive/Business Owner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.13205  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kevin B. Higgins  
Mailing Address 100 Van Doren Ave  
City Chatham State NJ Zip Code 07928  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Swiss Re Occupation Financial Services/ Investments  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1800.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.13207  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Edward G. Hoch

Mailing Address 11 N Church Rd

City State Zip Code  
Saddle River NJ 07458

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
385.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2008

Transaction ID: SA11AI.13210

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Lynn Horn

Mailing Address 57 Maria Rd

City State Zip Code  
Woodcliff Lake NJ 07677

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

Name of Employer Self Employed Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2008

Transaction ID: SA11AI.13213

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Edward T. Joel

Mailing Address 232 Ackerman Ave

City State Zip Code  
Ho Ho Kus NJ 07423

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

Name of Employer Elliott Mgmt Corp Occupation Chief Compliance Officer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2008

Transaction ID: SA11AI.13229

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3050.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Diane Joest  
Mailing Address 8 W Crisman Rd  
City Columbia State NJ Zip Code 07832  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4300.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11AI.13230  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leonard S. Kahn  
Mailing Address 68 Huff Ter  
City Upper Saddle River State NJ Zip Code 07458  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 333.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.13234  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles J. X. Kahwaty, Esq.  
Mailing Address 636 Navaho Trail Dr  
City Franklin Lakes State NJ Zip Code 07417  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Attorney  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 460.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.13235  
Amount of Each Receipt this Period 60.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2385.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Camille Kampouris

Mailing Address 622 Van Beuren Rd  
Emmanuel Kampouris Foundation

City State Zip Code  
Morristown NJ 07960

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.13239

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Emmanuel Kampouris

Mailing Address 622 Van Beuren Rd  
Emmanuel Kampouris Foundation

City State Zip Code  
Morristown NJ 07960

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.13240

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles A. Kaplan

Mailing Address 125 E Slope Rd

City State Zip Code  
Mahwah NJ 07430

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

Name of Employer U.S. Gun Exchange LLC Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13242

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4800.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles A. Kaplan

Mailing Address 125 E Slope Rd

City State Zip Code  
Mahwah NJ 07430

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

Name of Employer U.S. Gun Exchange LLC Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 03 / 2008

**Transaction ID:** SA11AI.13241

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Honorable Kevin D. Kelly, Esq.

Mailing Address PO Box 887  
Kelly, Ward, & Laemers LLC

City State Zip Code  
Newton NJ 07860

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

Name of Employer Kelly, Ward, & Laemers LLC Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2008

**Transaction ID:** SA11AI.13246

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gayle Kesselman, MD

Mailing Address 519 Hackensack St

City State Zip Code  
Carlstadt NJ 07072

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

Name of Employer Univ. Correctional Health Occupation Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 21 / 2008

**Transaction ID:** SA11AI.13249

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **550.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 33 / 154</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann Kievit	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 29 Dogwood Trl	<b>Transaction ID:</b> SA11AI.13251
	City State Zip Code Stockholm NJ 07460	Amount of Each Receipt this Period 1300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Employed Occupation Homemaker Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Walter H. Kleiner	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 1725 89th Ave NE	<b>Transaction ID:</b> SA11AI.13257
	City State Zip Code Clyde Hill WA 98004	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Walter H. Kleiner	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 1725 89th Ave NE	<b>Transaction ID:</b> SA11AI.14309
	City State Zip Code Clyde Hill WA 98004	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Conduit: Club for Growth <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 950.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Ms. Virginia A. Korteweg

Mailing Address 800 Summit Ave

City State Zip Code  
River Edge NJ 07661

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

Name of Employer Occupation  
Coachworks' Rolls Royce, Inc. Co-Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.13265

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Susan Kotta

Mailing Address 33 Littleworth Ln

City State Zip Code  
Sea Cliff NY 11579

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.13266

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael Kraynak, Jr.

Mailing Address 401 Mountain Ave

City State Zip Code  
Ridgewood NJ 07450

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

Name of Employer Occupation  
Brown Brothers' Harriman & Co Investment Management

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.13269

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Claire A. Kretschmer  
Mailing Address 3 Eagle Hill Rd  
City Woodcliff Lake State NJ Zip Code 07677  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Housewife  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: SA11AI.13271  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles D. Krug  
Mailing Address 444 Shades Of Death Rd  
City Great Meadows State NJ Zip Code 07838  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.13272  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Herman Kumm  
Mailing Address 15 Franklin Ct  
City Emerson State NJ Zip Code 07630  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired Exec.  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.13277  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John A. Lindblad

Mailing Address 104 Manhattan Ave

City State Zip Code  
Waldwick NJ 07463

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.13292

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Lee Lipton

Mailing Address 918 Horse Valley Rd  
918 Wall Street

City State Zip Code  
Newton NJ 07860

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

Name of Employer Occupation  
GIII Apparel Vice President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.13294

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Stanley Livingston

Mailing Address PO Box 11

City State Zip Code  
Bristol RI 02809

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.14314

Amount of Each Receipt this Period

250.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Matthew R. Luttinger

Mailing Address 11 Merillon Ave

City State Zip Code  
Garden City NY 11530

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

Name of Employer Grant Thornton LLP Occupation CPA

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.13300

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. John E. Lynch

Mailing Address 84 Fox Hollow Rd

City State Zip Code  
Sparta NJ 07871

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13302

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles K. MacDonald

Mailing Address 16 Piney Glen Ct

City State Zip Code  
Potomac MD 20854

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

Name of Employer Elliott Management Corp Occupation Investment Management

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13304

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lloyd W. Martinson

Mailing Address 4 Carriage Way

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Precision System Design, Inc. Occupation Managing Director

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID:** SA11AI.13311  
 Amount of Each Receipt this Period 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas J. McGill

Mailing Address 190 W Allendale Ave

City Allendale State NJ Zip Code 07401

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

Name of Employer Allendale Machinery Systems, Inc. Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 10 / 27 / 2008  
**Transaction ID:** SA11AI.13322  
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Andrew J. McKenna

Mailing Address 2321 N Kentucky St

City Arlington State VA Zip Code 22205

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

Name of Employer McKenna & Associates, LLC Occupation Consulting

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID:** SA11AI.13325  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Henry P. McNamara  
Mailing Address 451 Carlton Rd  
City Wyckoff State NJ Zip Code 07481  
FEC ID number of contributing federal political committee. **C**  
Name of Employer 40th District - NJ Occupation Senator  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify)   
750.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.13328  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Henry P. McNamara  
Mailing Address 451 Carlton Rd  
City Wyckoff State NJ Zip Code 07481  
FEC ID number of contributing federal political committee. **C**  
Name of Employer 40th District - NJ Occupation Senator  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify)   
1500.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.13327  
Amount of Each Receipt this Period 750.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ilona Mary Mellor  
Mailing Address 139 Franklin Ave  
City Oakland State NJ Zip Code 07436  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify)   
260.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.13332  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... **1025.00**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Brian P. Miller

Mailing Address 17 Deep Valley Trl

City State Zip Code  
Stamford CT 06903

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

Name of Employer Elliott Associates Occupation Trader

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.13335

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Kenneth A. Miller

Mailing Address 9 Main St Rm 103

City State Zip Code  
Sussex NJ 07461

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

Name of Employer High Point Regional High School Occupation Teacher's Assistant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 349.06

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.13339

Amount of Each Receipt this Period  
83.70

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kenneth A. Miller

Mailing Address 9 Main St Rm 103

City State Zip Code  
Sussex NJ 07461

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

Name of Employer High Point Regional High School Occupation Teacher's Assistant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 399.09

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.13340

Amount of Each Receipt this Period  
50.03

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2133.73**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 41 / 154
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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth A. Miller	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 9 Main St Rm 103	<b>Transaction ID:</b> SA11AI.13336
	City State Zip Code Sussex NJ 07461	Amount of Each Receipt this Period 38.25
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer High Point Regional High School	Occupation Teacher's Assistant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 437.34	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth A. Miller	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 9 Main St Rm 103	<b>Transaction ID:</b> SA11AI.13338
	City State Zip Code Sussex NJ 07461	Amount of Each Receipt this Period 63.25
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer High Point Regional High School	Occupation Teacher's Assistant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.59	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth A. Miller	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 9 Main St Rm 103	<b>Transaction ID:</b> SA11AI.13337
	City State Zip Code Sussex NJ 07461	Amount of Each Receipt this Period 27.96
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer High Point Regional High School	Occupation Teacher's Assistant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 528.55	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>129.46</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jack E. Monett

Mailing Address 1 Roberts Rd

City Warren State NJ Zip Code 07059

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID: SA11AI.13346**  
 Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. James R. Moran

Mailing Address 17 Donna Ln

City Midland Park State NJ Zip Code 07432

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

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 408.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID: SA11AI.13349**  
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. George Morville, Jr.

Mailing Address 55 Newton Sparta Rd  
The Morville Agency

City Newton State NJ Zip Code 07860

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

Name of Employer The Morville Agency Occupation Insurance/Self Employed

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 04 / 2008  
**Transaction ID: SA11AI.13352**  
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

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

Mailing Address 2321 N Kentucky St

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
McKenna & Associates, LLC Consulting

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.13353

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Gloria Moyna

Mailing Address 172 Goldfinch Ct

City State Zip Code  
Hackettstown NJ 07840

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.13354

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Birch M. Mullins

Mailing Address 201 S Warson Rd

City State Zip Code  
Saint Louis MO 63124

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

Name of Employer Occupation  
Bauer Properties Real Estate Investor

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.14328

Amount of Each Receipt this Period

100.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Ms. Alex Mulvihill

Mailing Address 12 Perona Rd

City State Zip Code  
Andover NJ 07821

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

Name of Employer Self Occupation Student

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

**Transaction ID:** SA11AI.13359

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ms. Alex Mulvihill

Mailing Address 12 Perona Rd

City State Zip Code  
Andover NJ 07821

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

Name of Employer Self Occupation Student

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

**Transaction ID:** SA11AI.13360

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Alex Mulvihill

Mailing Address 12 Perona Rd

City State Zip Code  
Andover NJ 07821

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

Name of Employer Self Occupation Student

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	4	/	2	0	0	8

**Transaction ID:** SA11AI.13361

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 154
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Chris Mulvihill	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 66 Orton Rd	<b>Transaction ID:</b> SA11AI.13362
	City State Zip Code West Caldwell NJ 07006	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Boomerang Systems President	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jane Mulvihill	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 66 Orton Rd	<b>Transaction ID:</b> SA11AI.13363
	City State Zip Code West Caldwell NJ 07006	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Employed Homemaker	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jane Mulvihill	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 66 Orton Rd	<b>Transaction ID:</b> SA11AI.13364
	City State Zip Code West Caldwell NJ 07006	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Employed Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

<b>A.</b>	Full Name (Last, First, Middle Initial) Katrina Mulvihill		Date of Receipt
	Mailing Address 12 Perona Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 4 / 2 0 0 8
	City	State	Zip Code
	Andover	NJ	07821
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13365
Name of Employer Crystal Springs Golf		Occupation Partner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Peter Mulvihill		Date of Receipt
	Mailing Address PO Box 190		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	City	State	Zip Code
	Lyme	NH	03768
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13366
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 200.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. William L. Munson		Date of Receipt
	Mailing Address 762 Albemarle St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 7 / 2 0 0 8
	City	State	Zip Code
	Wyckoff	NJ	07481
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.13367
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 47 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joshua Nadell

Mailing Address 28 Cayuga Way

City State Zip Code  
Short Hills NJ 07078

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

Name of Employer Occupation  
Elliott Management Corp CFO

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2008

**Transaction ID:** SA11AI.13371

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark Nelson

Mailing Address 218 Route 94 Ste A

City State Zip Code  
Vernon NJ 07462

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

Name of Employer Occupation  
HMM Management LLC Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 04 / 2008

**Transaction ID:** SA11AI.13380

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jay Newman

Mailing Address 24 W 10th St

City State Zip Code  
New York NY 10011

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

Name of Employer Occupation  
Elliott Associates L.P. Sr. Portfolio Mgr-Hedge Fund

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2008

**Transaction ID:** SA11AI.13384

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 48 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Herbert L. Nichols

Mailing Address 1014 Ripley Ave

City State Zip Code  
Westfield NJ 07090

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 100.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ray Oden

Mailing Address 702 Thora Blvd

City State Zip Code  
Shreveport LA 71106

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 500.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence N. Passarelli, D.D.S

Mailing Address 172 Franklin Ave

City State Zip Code  
Ridgewood NJ 07450

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 500.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

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



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

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

FOR LINE NUMBER: PAGE 49 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carlos Paz

Mailing Address PO Box 403

City State Zip Code  
Mc Afee NJ 07428

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

Name of Employer Occupation  
Mag Construction Contractor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.13406

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Nicholas Peay, Jr.

Mailing Address 2965 Fairmount Blvd

City State Zip Code  
Cleveland Heights OH 44118

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

Name of Employer Occupation  
Self Investor

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

**Transaction ID:** SA11AI.14337

Amount of Each Receipt this Period  
250.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Helgard Perretta

Mailing Address 10 Alford Dr

City State Zip Code  
Saddle River NJ 07458

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

Name of Employer Occupation  
Great Eastern Color Litho Corp Lithographer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** SA11AI.13412

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 154  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Gerald Platt

Mailing Address 1636 3rd Ave

City State Zip Code  
New York NY 10128

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

Name of Employer Pomander Occupation Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** SA11AI.13424

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Gina M. Pontrelli

Mailing Address 521 Lafayette Ave

City State Zip Code  
Hawthorne NJ 07506

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

Name of Employer SDL Inc. Occupation Office Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.13425

Amount of Each Receipt this Period  
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel Posner

Mailing Address 500 W End Ave Apt 3a

City State Zip Code  
New York NY 10024

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

Name of Employer D.E. Shaw & Co Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

**Transaction ID:** SA11AI.13426

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2300.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Douglas K. Powell

Mailing Address 4 Michael Dr

City State Zip Code  
Hackettstown NJ 07840

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

Name of Employer Occupation  
SAP America Software Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** SA11AI.13428

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. William B. Quinn

Mailing Address 5 Minisink Dr

City State Zip Code  
Montague NJ 07827

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.13436

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Raffaele

Mailing Address 740 Walnut St

City State Zip Code  
Paramus NJ 07652

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** SA11AI.13438

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Anthony Raffaele

Mailing Address 740 Walnut St

City State Zip Code  
Paramus NJ 07652

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 25.00

Transaction ID: SA11AI.13439

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Howard Rich

Mailing Address 73 Spring St Rm 408  
Howard Rich Trust

City State Zip Code  
New York NY 10012

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

Name of Employer ALG Occupation Real Estate Developer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 2300.00

Transaction ID: SA11AI.14343

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Alice Rigney

Mailing Address 48 Knoll Rd

City State Zip Code  
Tenafly NJ 07670

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

Name of Employer Self Employed Occupation Artist

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 25.00

Transaction ID: SA11AI.13446

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2350.00**

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

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

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

FOR LINE NUMBER: PAGE 53 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harvey W. Rimbach

Mailing Address 444 Darlington Ave

City Ramsey State NJ Zip Code 07446

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt: 10 / 20 / 2008  
**Transaction ID:** SA11AI.13447  
 Amount of Each Receipt this Period: 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard Ritholz

Mailing Address 282 Hartshorn Dr

City Short Hills State NJ Zip Code 07078

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

Name of Employer Elliott Associates Occupation Commodities Trading

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt: 10 / 21 / 2008  
**Transaction ID:** SA11AI.13448  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter J. Rizzi

Mailing Address 4 Briggs Ave

City Monroe Twp State NJ Zip Code 08831

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

Name of Employer Elliott Management Corp Occupation Trader

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt: 10 / 21 / 2008  
**Transaction ID:** SA11AI.13449  
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3050.00**

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

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

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

FOR LINE NUMBER: PAGE 54 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mary Rospos  
Mailing Address 6 Inlet Ter  
City Belmar State NJ Zip Code 07719  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Homemaker  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.13453  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas K. Rospos  
Mailing Address 6 Inlet Ter  
City Belmar State NJ Zip Code 07719  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Birdsill Engineering Occupation Engineer  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.13454  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. William E. Rypkema  
Mailing Address 111 Laurel Brook Rd  
City Montvale State NJ Zip Code 07645  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2100.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.13460  
Amount of Each Receipt this Period 300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jay D. Schainholz

Mailing Address 250 Gorge Rd Apt 18l

City State Zip Code  
Cliffside Park NJ 07010

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

Name of Employer Occupation  
Medin Corporation Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.13471

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. William H. Schmidt, Esq.

Mailing Address 291 Farview Ave

City State Zip Code  
Paramus NJ 07652

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

Name of Employer Occupation  
Retired-Ex Bergen City Prosecutor Retired Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.13473

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles F. Schneider

Mailing Address 68 Raymond Ave

City State Zip Code  
Rutherford NJ 07070

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.13474

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Charles N. Schorin	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 90 Riverside Dr Apt 12g	<b>Transaction ID:</b> SA11AI.13476
	City State Zip Code New York NY 10024	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Elliott Associates Portfolio Manager	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Harry Richard Schumacher	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 47 E 88th St	<b>Transaction ID:</b> SA11AI.13480
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Retired Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 310.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Harry Richard Schumacher	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 47 E 88th St	<b>Transaction ID:</b> SA11AI.14351
	City State Zip Code New York NY 10128	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Conduit: Club for Growth
	Name of Employer Occupation Retired Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1075.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harry Richard Schumacher  
Mailing Address 47 E 88th St  
City New York State NY Zip Code 10128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 385.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.13481  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ernest A. Scinto  
Mailing Address 388 Knickerbocker Rd  
City Tenafly State NJ Zip Code 07670  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Back Fence Restaurant Occupation Owner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 215.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.13484  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Tonino J. Sementilli  
Mailing Address 619 E 187th St # 1  
City Bronx State NY Zip Code 10458  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Total Care/Amato Pharmacies Occupation Pharmacist  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.13488  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2350.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 58 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joseph P. Sheffel  
Mailing Address 111 Hilltop Ln  
City Wyckoff State NJ Zip Code 07481  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.13493  
Amount of Each Receipt this Period 200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gordon Singer  
Mailing Address 712 5th Ave Fl 36  
City New York State NY Zip Code 10019  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Elliott Advisors Occupation Banker  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.13498  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Stephan Solomon  
Mailing Address 49 Round Hill Rd  
City Greenwich State CT Zip Code 06831  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Fimat USA Occupation Executive  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.13512  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3200.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Lynne Stender

Mailing Address 17 Maines Ln

City State Zip Code  
Blairstown NJ 07825

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

Name of Employer 10-31 Inc. Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 75.00

Transaction ID: SA11AI.13527

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Eileen Stricker-Rolando

Mailing Address PO Box 854

City State Zip Code  
Vernon NJ 07462

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

Name of Employer Grano and Rohrer Occupation Dental Technician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: SA11AI.13535

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Richard H. Strobel

Mailing Address 4 Fall Dr

City State Zip Code  
Stockholm NJ 07460

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

Name of Employer Retired Occupation Retired/ Engineer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 358.00

Transaction ID: SA11AI.13536

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1175.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Song-Chuen Su		Date of Receipt
	Mailing Address 28 Arthur Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Rutherford	NJ	07070
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13537
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 50.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Barbara Swanson		Date of Receipt
	Mailing Address 119 Turtle Point Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Tuxedo Park	NY	10987
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13539
Name of Employer Self Employed		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert E. Swanson		Date of Receipt
	Mailing Address 119 Turtle Point Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Tuxedo Park	NY	10987
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.13541
Name of Employer Ridgewood Renewable Power		Occupation President/CEO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....  4650.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stephen W. Swentzel

Mailing Address PO Box 361

City State Zip Code  
Sparta NJ 07871

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

Name of Employer Occupation  
Stephen Swentzel Concrete Owner

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.13543

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Paul B. Tahan

Mailing Address 8 Brandywine Rd

City State Zip Code  
Wayne NJ 07470

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

Name of Employer Occupation  
Self Business Owner

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.13547

Amount of Each Receipt this Period  
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Guy F. Talarico

Mailing Address 553 Corbett Pl

City State Zip Code  
Oradell NJ 07649

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

Name of Employer Occupation  
Alaric Compliance Services LLC CEO

Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13548

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Brenda Tarulli

Mailing Address 11 Joshua Dr

City State Zip Code  
Ramsey NJ 07446

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

Name of Employer Occupation  
Self Employed Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.13549

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph D. Tarulli

Mailing Address 11 Joshua Dr

City State Zip Code  
Ramsey NJ 07446

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

Name of Employer Occupation  
HBO/ AOL Time Warner VP Finance

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.13550

Amount of Each Receipt this Period  
800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Gladys M. Thonnerieux

Mailing Address PO Box 336

City State Zip Code  
Newton NJ 07860

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** SA11AI.13557

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3350.00**

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

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

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

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Hon. Brian R. Tipton, Esq.  
Mailing Address 40 Harmony Sta  
City Phillipsburg State NJ Zip Code 08865  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Florio Perrucci Steinhardt & Fader Occupation Partner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.13559  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas V. Tobin  
Mailing Address 1 Gray Rock Dr Unit 11  
City Vernon State NJ Zip Code 07462  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 11 / 01 / 2008  
Transaction ID: SA11AI.13560  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert S. Todd  
Mailing Address 130 Honeysuckle Dr  
City Township Of Washin State NJ Zip Code 07676  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 215.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.13562  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1075.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 64 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Honorable Joseph Tomanelli

Mailing Address 614 Blue Ridge Ln

City State Zip Code  
Mahwah NJ 07430

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

Name of Employer Occupation  
Joseph Tomanelli CPA CPA

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 17 / 2008

**Transaction ID:** SA11AI.13563

Amount of Each Receipt this Period  
198.67

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lewis E. Topper

Mailing Address 4240 Bell Blvd Ste 200

City State Zip Code  
Bayside NY 11361

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

Name of Employer Occupation  
Fast Food Systems, Inc Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 23 / 2008

**Transaction ID:** SA11AI.13564

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Bruce Townsend

Mailing Address 701 Oak Ln

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 17 / 2008

**Transaction ID:** SA11AI.13565

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2248.67**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 154
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Russell P. Trocano, Esq.

Mailing Address 60 South Maple Ave

City State Zip Code  
Ridgewood NJ 07450

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

Name of Employer Russell P. Trocano & Associates  
Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1525.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.13566

Amount of Each Receipt this Period  
925.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Russell P. Trocano, Esq.

Mailing Address 60 South Maple Ave

City State Zip Code  
Ridgewood NJ 07450

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

Name of Employer Russell P. Trocano & Associates  
Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.14041

Amount of Each Receipt this Period  
875.00

In-kind - food and beverage  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Ellen Turnamian

Mailing Address 47 N Bayard Ln

City State Zip Code  
Mahwah NJ 07430

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

Name of Employer Royal Oak Construction Co  
Occupation Office Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.13571

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2050.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 66 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Dorothy Turse  
Mailing Address 1125 Colonial Way  
City State Zip Code  
Bridgewater NJ 08807  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 275.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.13573  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Scott Van den Bosch  
Mailing Address PO Box 184  
City State Zip Code  
Ridgewood NJ 07451  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Navigare Partners, LLC Occupation Analyst  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 550.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.13575  
Amount of Each Receipt this Period 75.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Rev. Gerald VanderHart  
Mailing Address 910 W End Dr  
City State Zip Code  
Newton NJ 07860  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired Pastor  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 358.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: SA11AI.13580  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. Calvin E. Wahl

Mailing Address 131 Fuhrman Ave

City Ramsey State NJ Zip Code 07446

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

Name of Employer Retired - Ramsey Board Occupation Retired - Teacher

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 10 / 22 / 2008  
**Transaction ID:** SA11AI.13588  
 Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret Watkins

Mailing Address 918 Bogert Rd

City River Edge State NJ Zip Code 07661

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 10 / 31 / 2008  
**Transaction ID:** SA11AI.13596  
 Amount of Each Receipt this Period 125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. William F. Weber

Mailing Address 91 Iroquois Trl

City Wayne State NJ Zip Code 07470

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 10 / 20 / 2008  
**Transaction ID:** SA11AI.13597  
 Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Weir

Mailing Address 85 Park Edge

City Berkeley Heights State NJ Zip Code 07922

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 500.00

Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.13601

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Weksel

Mailing Address 252 Bearwoods Rd

City Park Ridge State NJ Zip Code 07656

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

Name of Employer Self Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 500.00

Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.13602

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Whitcomb

Mailing Address 22840 N Country Club Trl

City Scottsdale State AZ Zip Code 85255

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period 300.00

Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.14379

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

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

FOR LINE NUMBER: PAGE 69 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul H. Wick

Mailing Address 170 Ramoso Rd

City State Zip Code  
Portola Valley CA 94028

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

Name of Employer Occupation  
J. & W. Seligman & Co. Mutual Fund Manager

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** SA11AI.14380

Amount of Each Receipt this Period  
500.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lankeswara Hemal Wijayaratne

Mailing Address 10 Spruce Hollow Rd

City State Zip Code  
Green Brook NJ 08812

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

Name of Employer Occupation  
Self Employed Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 6 / 2 0 0 8

**Transaction ID:** SA11AI.13614

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mr. Arthur Williams, IV

Mailing Address 18 Sand Spring Ln

City State Zip Code  
Morristown NJ 07960

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

Name of Employer Occupation  
Pine Grave Associates Investment Sales

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

**Transaction ID:** SA11AI.13616

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Johann Winter

Mailing Address 326 South Dr

City State Zip Code  
Paramus NJ 07652

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 213.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13623

Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. James Wintersteen

Mailing Address 27 Myrtle Ave

City State Zip Code  
Mill Valley CA 94941

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.14384

Amount of Each Receipt this Period 1000.00

Conduit: Club for Growth

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Carey Wolchok

Mailing Address 200 W 57th St Ste 1005

City State Zip Code  
New York NY 10019

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Finance

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11AI.13629

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2025.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 154  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Mr. William J. Wrede

Mailing Address 65 Park Ave  
Prestige Plumbing & Heating

City Randolph State NJ Zip Code 07869

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

Name of Employer: Prestige Plumbing & Heating  
Occupation: Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: SA11AI.13630

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mr. Irwin Yagoda, PH.D.

Mailing Address 2238 Harmon Cove Tower

City Secaucus State NJ Zip Code 07094

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

Name of Employer: Self Employed  
Occupation: Investor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 300.00

Transaction ID: SA11AI.13633

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Christina Young

Mailing Address 94 Spring Valley Rd

City Hardwick State NJ Zip Code 07825

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

Name of Employer: Intel Corp  
Occupation: Program Manager

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 350.00

Transaction ID: SA11AI.13634

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

**TOTAL** This Period (last page this line number only) ..... ► **114978.86**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 154  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 FIRST STREET

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5686.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11B.13374

Amount of Each Receipt this Period  
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
AFLAC Inc., PAC

Mailing Address 1300 Pennsylvania Ave NW Ste 300

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 8

**Transaction ID:** SA11C.12905

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AFSA PAC

Mailing Address 919 18th St NW Ste 300

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** SA11C.12906

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Electric Power Committee PAC

Mailing Address 801 Pennsylvania Ave NW Ste 320

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00096842

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11C.12914

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 154  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
American Express PAC

Mailing Address 801 Pennsylvania Ave NW Ste 650

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
10 / 31 / 2008

**Transaction ID:** SA11C.12915

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Resort Devel Assn Resort Owners PAC

Mailing Address 1201 15th St NW Ste 400  
American Resort Devel Assn

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY  
11 / 03 / 2008

**Transaction ID:** SA11C.12916

Amount of Each Receipt this Period 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Shipping & Logistics Group Inc. Freedom PAC

Mailing Address 1 Maynard Dr

City Park Ridge State NJ Zip Code 07656

FEC ID number of contributing federal political committee. **C** C00432963

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt MM / DD / YYYY  
10 / 29 / 2008

**Transaction ID:** SA11C.12917

Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 154

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Bank of America Corporation Federal PAC

Mailing Address 1100 N King St

City State Zip Code  
Wilmington DE 19884

FEC ID number of contributing federal political committee. C C00364778

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11C.12929

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Bergen County Women's Rep Club

Mailing Address 339 Main St

City State Zip Code  
Hackensack NJ 07601

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11C.12947

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
CAFPAC

Mailing Address 228 S Washington St Ste 115

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. C C00440024

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

**Transaction ID:** SA11C.12983

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 154  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Citizens United Political Victory Fund

Mailing Address 1006 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 28 / 2008  
Transaction ID: SA11C.13007  
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt: 10 / 24 / 2008  
Transaction ID: SA11C.14250  
Amount of Each Receipt this Period: 100.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt: 10 / 27 / 2008  
Transaction ID: SA11C.14254  
Amount of Each Receipt this Period: 100.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**SCOTT GARRETT FOR CONGRESS**

**A.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address **2001 L St NW Ste 600**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 8

**Transaction ID:** SA11C.14255

Amount of Each Receipt this Period 1715.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address **2001 L St NW Ste 600**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11C.14249

Amount of Each Receipt this Period 1960.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address **2001 L St NW Ste 600**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11C.14253

Amount of Each Receipt this Period 1230.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 78 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Club for Growth PAC  
Mailing Address 2001 L St NW Ste 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt: 10 / 30 / 2008  
Transaction ID: SA11C.14256  
Amount of Each Receipt this Period: 1562.00  
Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Club for Growth PAC  
Mailing Address 2001 L St NW Ste 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt: 10 / 30 / 2008  
Transaction ID: SA11C.14260  
Amount of Each Receipt this Period: 3600.00  
Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Club for Growth PAC  
Mailing Address 2001 L St NW Ste 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 585.00

Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA11C.14259  
Amount of Each Receipt this Period: 1590.00  
Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 154

(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
585.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11C.14251

Amount of Each Receipt this Period

350.00

Conduit

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
585.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 8

Transaction ID: SA11C.14258

Amount of Each Receipt this Period

275.00

Conduit

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
585.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8

Transaction ID: SA11C.14252

Amount of Each Receipt this Period

1665.00

Conduit

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

0.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 154

(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Club for Growth PAC

Mailing Address 2001 L St NW Ste 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346536

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
585.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 04 / 2008

Transaction ID: SA11C.14257

Amount of Each Receipt this Period

3815.00

Conduit

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
COALPAC - PAC of the Natl Mining Association

Mailing Address 101 Constitution Ave NW Ste 500  
Natl Mining Association

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 31 / 2008

Transaction ID: SA11C.13024

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Committee To Re-Elect Trent Franks to Congress

Mailing Address 12416 N 57th Dr

City State Zip Code  
Glendale AZ 85304

FEC ID number of contributing federal political committee. **C** C00367110

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 28 / 2008

Transaction ID: SA11C.13030

Amount of Each Receipt this Period

2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
ConocoPhillips Spirit PAC  
Mailing Address 1776 Eye St NW Ste 700

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00112896

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 29 / 2008  
**Transaction ID:** SA11C.13036  
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CONSERVATIVE OPPURTUNITY LEADERSHIP AND ENTERPRISE PAC  
Mailing Address 12176 Chancery Station Cir

City Reston State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 10 / 29 / 2008  
**Transaction ID:** SA11C.13028  
 Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Conservative Victory Fund PAC  
Mailing Address PO Box 15245

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5474.95

Date of Receipt: 10 / 29 / 2008  
**Transaction ID:** SA11C.13037  
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 154

(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
Continental Airlines Inc. Employee PAC

Mailing Address 1350 I St NW Ste 1250

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00101766

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 03 / 2008

Transaction ID: SA11C.13040

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Covanta Energy Corporation PAC

Mailing Address 40 Lane Rd

City State Zip Code  
Fairfield NJ 07004

FEC ID number of contributing federal political committee. **C** C00142158

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 29 / 2008

Transaction ID: SA11C.13047

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Hudson Valley PAC

Mailing Address PO Box 479

City State Zip Code  
Suffern NY 10901

FEC ID number of contributing federal political committee. **C** C00158865

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 21 / 2008

Transaction ID: SA11C.13218

Amount of Each Receipt this Period

3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 83 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
IDT Corp. PAC

Mailing Address 520 Broad St Ste 901

City State Zip Code  
Newark NJ 07102

FEC ID number of contributing federal political committee. **C** C00367383

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 1 / 2 0 0 8

**Transaction ID:** SA11C.13221

Amount of Each Receipt this Period  
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Jobs, Economy and Budget Fund

Mailing Address 7315 Wisconsin Ave Ste 705

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 3 / 2 0 0 8

**Transaction ID:** SA11C.13228

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
JP Morgan & Chase Co. PAC

Mailing Address 601 Pennsylvania Ave NW, Suite 250  
JP Morgan Chase & Co

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00104299

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11C.13232

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

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

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

FOR LINE NUMBER: PAGE 84 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
King for Congress  
Mailing Address PO Box 576  
City Odebolt State IA Zip Code 51458  
FEC ID number of contributing federal political committee. **C** C00373563  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11C.13254  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
KPMG PAC  
Mailing Address PO Box 18254  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00280222  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11C.13268  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Louie Gohmert for Congress Committee  
Mailing Address 3310 S Broadway Ave Ste 100  
City Tyler State TX Zip Code 75701  
FEC ID number of contributing federal political committee. **C** C00386532  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11C.13298  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Managed Funds Association PAC

Mailing Address 2025 M St NW Ste 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00306894

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 11 / 01 / 2008  
**Transaction ID:** SA11C.13307  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
McCotter Congressional Committee

Mailing Address PO Box 530788

City Livonia State MI Zip Code 48153

FEC ID number of contributing federal political committee. **C** C00365841

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 30 / 2008  
**Transaction ID:** SA11C.13318  
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mortgage Insurance Co PAC

Mailing Address 1425 K St NW Ste 210

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00113258

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 24 / 2008  
**Transaction ID:** SA11C.13351  
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
National Pro-Life Alliance PAC  
Mailing Address 4521 Windsor Arms Ct  
City Annandale State VA Zip Code 22003  
FEC ID number of contributing federal political committee. **C** C00358051  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11C.13372  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
National Right to Work Committee PAC  
Mailing Address 8001 Braddock Road Ste 500  
City Springfield State VA Zip Code 22160  
FEC ID number of contributing federal political committee. **C** C00164384  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11C.13375  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
New York Life Insurance Company PAC  
Mailing Address 1501 K St NW Ste 575  
City Washington State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00158881  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11C.13381  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 87 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
NSSGA RockPAC  
Mailing Address 1605 King St  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00089458  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11C.13391  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Pepsico Inc. PAC  
Mailing Address 101 Constitution Ave NW Ste 900  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00039321  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11C.13411  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
PIAPAC  
Mailing Address 400 N Washington St  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00004994  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11C.13417  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Prosperity PAC  
Mailing Address 1006 Pendleton St  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00377689  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 11 / 01 / 2008  
Transaction ID: SA11C.13431  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sheet Metal and Air Conditioning Contractors  
Mailing Address 305 4th St SE  
City Washington State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C** C00013961  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11C.13492  
Amount of Each Receipt this Period 5000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Statecard.com PAC  
Mailing Address 228 S Washington St Ste 115  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00438549  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 136.88  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11C.14356  
Amount of Each Receipt this Period 30.00  
Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6000.00  
**TOTAL** This Period (last page this line number only) ..... ►



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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 89 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
Slatecard.com PAC

Mailing Address 228 S Washington St Ste 115

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00438549

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 136.88

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11C.14357

Amount of Each Receipt this Period  
2.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Slatecard.com PAC

Mailing Address 228 S Washington St Ste 115

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00438549

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 136.88

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 8 / 2 0 0 8

**Transaction ID:** SA11C.14358

Amount of Each Receipt this Period  
13.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
The Legacy Committee PAC

Mailing Address 30011 Ivy Glenn Dr Ste 223

City State Zip Code  
Laguna Niguel CA 92677

FEC ID number of contributing federal political committee. **C** C00429084

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 8

**Transaction ID:** SA11C.13554

Amount of Each Receipt this Period  
1000.00

Conduit  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 154  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
The Legacy Committee PAC

Mailing Address 30011 Ivy Glenn Dr Ste 223

City Laguna Niguel State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C** C00429084

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 30 / 2008  
**Transaction ID:** SA11C.13555  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
VFW - PAC

Mailing Address 200 Maryland Ave NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00113001

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt 10 / 21 / 2008  
**Transaction ID:** SA11C.13584  
 Amount of Each Receipt this Period 1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
WAL PAC

Mailing Address 575 7th St NW Ste 350

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt 10 / 24 / 2008  
**Transaction ID:** SA11C.13589  
 Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 154  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Winning Strategies Washington PAC

Mailing Address 819 7th St NW Ste 501

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00368993

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: SA11C.13622

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	57300.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) 28th Hole, Inc.</p> <p>Mailing Address 88 Lawrence Rd</p> <p>City Lafayette State NJ Zip Code 07848</p> <p>Purpose of Disbursement Event facility, food, and beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13687</p> <p>Date of Disbursement 11 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) 7-Eleven</p> <p>Mailing Address 540 Main St</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement Volunteer food and beverage (Amex Card)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13727</p> <p>Date of Disbursement 11 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 8.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) A&amp;G Pizza</p> <p>Mailing Address 220 Spring St</p> <p>City Newton State NJ Zip Code 07860</p> <p>Purpose of Disbursement Volunteer food and beverage (Amex Card)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13714</p> <p>Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 82.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13715 Date of Disbursement 10 / 07 / 2008
	Mailing Address 220 Spring St	Amount of Each Disbursement this Period 75.15
	City Newton State NJ Zip Code 07860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13716 Date of Disbursement 10 / 07 / 2008
	Mailing Address 220 Spring St	Amount of Each Disbursement this Period 56.30
	City Newton State NJ Zip Code 07860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13717 Date of Disbursement 10 / 10 / 2008
	Mailing Address 220 Spring St	Amount of Each Disbursement this Period 44.20
	City Newton State NJ Zip Code 07860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13722
	Mailing Address 220 Spring St	Date of Disbursement 10 / 26 / 2008
	City Newton State NJ Zip Code 07860	Amount of Each Disbursement this Period 37.55
	Purpose of Disbursement Volunteer food and beverage (Reimb Other)	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13718
	Mailing Address 220 Spring St	Date of Disbursement 10 / 29 / 2008
	City Newton State NJ Zip Code 07860	Amount of Each Disbursement this Period 102.72
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) A&G Pizza	Transaction ID: SB17.13721
	Mailing Address 220 Spring St	Date of Disbursement 10 / 31 / 2008
	City Newton State NJ Zip Code 07860	Amount of Each Disbursement this Period 44.10
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	<input type="checkbox"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) A&G Pizza Mailing Address 220 Spring St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13720 Date of Disbursement 11 / 01 / 2008 Amount of Each Disbursement this Period 61.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) A&G Pizza Mailing Address 220 Spring St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13719 Date of Disbursement 11 / 02 / 2008 Amount of Each Disbursement this Period 51.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) A&G Pizza Mailing Address 220 Spring St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13723 Date of Disbursement 11 / 05 / 2008 Amount of Each Disbursement this Period 42.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ali's Pizza Mailing Address 1382 E Capitol St NE City Washington State DC Zip Code 20003 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13806 Date of Disbursement 10 / 16 / 2008 Amount of Each Disbursement this Period 61.70 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) David Allen Mailing Address 1824 Harvard St NW Apt 301 City Washington State DC Zip Code 20009 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13858 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 356.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement [Amex Card] see memo Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13642 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 10232.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

10588.90

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement [Amex Card] see memo</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13644</p> <p>Date of Disbursement 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2150.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13682</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 25.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13683</p> <p>Date of Disbursement 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 45.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**2221.83**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13676</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 26.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13677</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 200.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Merchant Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13678</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 112.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**340.44**

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Establishment Services Mailing Address PO Box 53852 City Phoenix State AZ Zip Code 85072 Purpose of Disbursement Merchant Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13679 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 11.83 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) Amtrak Mailing Address 42 Street Grand Central City Newark State NJ Zip Code 07102 Purpose of Disbursement Travel (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13645 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 172.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>C.</b> Full Name (Last, First, Middle Initial) Amtrak Mailing Address 42 Street Grand Central City Newark State NJ Zip Code 07102 Purpose of Disbursement Travel (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13646 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 0 8
	Amount of Each Disbursement this Period 194.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11.83
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Andres Restaurant</p> <p>Mailing Address 188 Spring St</p> <p>City Newton State NJ Zip Code 07860</p> <p>Purpose of Disbursement Event facility, food, and beverage (Amex)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14028</p> <p>Date of Disbursement 11 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 473.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address P.O. Box 2969</p> <p>City Omaha State NE Zip Code 68103</p> <p>Purpose of Disbursement Phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13647</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 75.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 15714</p> <p>City Wilmington State DE Zip Code 19886</p> <p>Purpose of Disbursement [BA Card] see memo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13729</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 128.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

203.24

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Elizabeth Bogle	Transaction ID: SB17.13789 Date of Disbursement 10 / 31 / 2008
	Mailing Address PO Box 1166	Amount of Each Disbursement this Period 1188.87
	City Montague State NJ Zip Code 07827	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll (Payroll Account) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Elizabeth Bogle	Transaction ID: SB17.13790 Date of Disbursement 11 / 01 / 2008
	Mailing Address PO Box 1166	Amount of Each Disbursement this Period 155.86
	City Montague State NJ Zip Code 07827	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mileage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lillian Bopp	Transaction ID: SB17.13911 Date of Disbursement 10 / 31 / 2008
	Mailing Address 158 Ridge Rd	Amount of Each Disbursement this Period 1216.25
	City Newton State NJ Zip Code 07860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll (Payroll Account) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	155.86
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Bull Feathers Mailing Address 410 First Street SE City Washington State DC Zip Code 20003 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13648 Date of Disbursement 09 / 23 / 2008 Amount of Each Disbursement this Period 139.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Campaignmoney.com Mailing Address 2145 Hamilton Ave City San Jose State CA Zip Code 95125 Purpose of Disbursement Computer software (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13835 Date of Disbursement 10 / 29 / 2008 Amount of Each Disbursement this Period 14.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Capitol Hill Club Mailing Address 300 1st St SE City Washington State DC Zip Code 20003 Purpose of Disbursement Event Catering (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13724 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 1198.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Capitol Hill Club

Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and beverage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13725  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Amount of Each Disbursement this Period

25.57
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Cardservice International, Inc.

Mailing Address PO Box 5180

City Simi Valley State CA Zip Code 93062

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13705  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	8

Amount of Each Disbursement this Period

54.49
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Cardservice International, Inc.

Mailing Address PO Box 5180

City Simi Valley State CA Zip Code 93062

Purpose of Disbursement  
Merchant Bank Fee

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13699  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	8

Amount of Each Disbursement this Period

207.53
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ►

262.02

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Cardservice International, Inc.  Mailing Address PO Box 5180  City Simi Valley State CA Zip Code 93062  Purpose of Disbursement Merchant Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13700 Date of Disbursement 10 / 24 / 2008  Amount of Each Disbursement this Period 175.99  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Cardservice International, Inc.  Mailing Address PO Box 5180  City Simi Valley State CA Zip Code 93062  Purpose of Disbursement Merchant Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13701 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 84.81  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Cardservice International, Inc.  Mailing Address PO Box 5180  City Simi Valley State CA Zip Code 93062  Purpose of Disbursement Merchant Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13702 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 103.52  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	364.32
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Cardservice International, Inc.  Mailing Address PO Box 5180  City Simi Valley State CA Zip Code 93062  Purpose of Disbursement Merchant Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13703 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 103.73  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Cardservice International, Inc.  Mailing Address PO Box 5180  City Simi Valley State CA Zip Code 93062  Purpose of Disbursement Merchant Bank Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13706 Date of Disbursement 11 / 04 / 2008  Amount of Each Disbursement this Period 67.65  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mr. Saverio V. Cereste  Mailing Address PO Box 845  City Fort Lee State NJ Zip Code 07024  Purpose of Disbursement In-kind - food and beverage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.14040 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 252.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

423.38

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) China Buffet Mailing Address 336b Main St City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Volunteer food and beverage (Reimb Other) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.14016 Date of Disbursement 10 / 14 / 2008 Amount of Each Disbursement this Period 9.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Chun Bo Mailing Address 66 Sparta Ave City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13691 Date of Disbursement 10 / 15 / 2008 Amount of Each Disbursement this Period 133.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) CNNJ Mailing Address 1977 N Olden Avenue Ext Ste 266 City Ewing State NJ Zip Code 08618 Purpose of Disbursement Ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13846 Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**350.00**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Cole Hargrave Snodgrass & Associates <hr/> Mailing Address PO Box 2034 <hr/> City Oklahoma City State OK Zip Code 73101 <hr/> Purpose of Disbursement Survey Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13710 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 5200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Committee To Elect Kruger Hakim & Donero <hr/> Mailing Address PO Box 442 <hr/> City Dumont State NJ Zip Code 07628 <hr/> Purpose of Disbursement Donation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13848 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) CPU Direct Network, LLC <hr/> Mailing Address PO Box 709 <hr/> City Effort State PA Zip Code 18330 <hr/> Purpose of Disbursement Internet service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13771 Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**5480.00**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Matt DeLuca</p> <p>Mailing Address 67 Hidden Glen Dr</p> <p>City Sparta State NJ Zip Code 07871</p> <p>Purpose of Disbursement GOTV door to door</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13917</p> <p>Date of Disbursement 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Matt DeLuca</p> <p>Mailing Address 67 Hidden Glen Dr</p> <p>City Sparta State NJ Zip Code 07871</p> <p>Purpose of Disbursement Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13918</p> <p>Date of Disbursement 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 240.08</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Direct Parking LLC</p> <p>Mailing Address 51 W 56th St</p> <p>City New York State NY Zip Code 10019</p> <p>Purpose of Disbursement Parking (Amex Card)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13870</p> <p>Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 32.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

540.08

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Domino's Pizza  Mailing Address 337 Main St  City Hackensack State NJ Zip Code 07601  Purpose of Disbursement Volunteer food and beverage (Reimb Other) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13784 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 41.57  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Domino's Pizza  Mailing Address 337 Main St  City Hackensack State NJ Zip Code 07601  Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13785 Date of Disbursement 11 / 01 / 2008  Amount of Each Disbursement this Period 90.62  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Domino's Pizza  Mailing Address 337 Main St  City Hackensack State NJ Zip Code 07601  Purpose of Disbursement Volunteer food and beverage (Reimb Caitl) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13786 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 23.03  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Domino's Pizza <hr/> Mailing Address 337 Main St <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13788 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 205.85
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Domino's Pizza <hr/> Mailing Address 337 Main St <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13787 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 39.01
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Dunkin Donuts <hr/> Mailing Address 5 Center St <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement Food and beverage (Amex Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13751 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 134.84
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Dunkin Donuts Mailing Address 5 Center St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13752 Date of Disbursement 11 / 02 / 2008 Amount of Each Disbursement this Period 30.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Dunkin Donuts Mailing Address 5 Center St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13755 Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 16.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Dunkin Donuts Mailing Address 5 Center St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13753 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 34.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Dunkin Donuts Mailing Address 5 Center St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13754 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 22.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Edison Plaza Parking Mailing Address 52 Commerce St City Newark State NJ Zip Code 07102 Purpose of Disbursement Parking (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13713 Date of Disbursement 11 / 04 / 2008 Amount of Each Disbursement this Period 21.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Embarq Mailing Address P.O. Box 740463 City Cincinnati State OH Zip Code 45274 Purpose of Disbursement Phone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13655 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 29.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

29.82

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Embarq  Mailing Address P.O. Box 740463  City Cincinnati State OH Zip Code 45274  Purpose of Disbursement Phone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.13656 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 30.43  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Embarq  Mailing Address P.O. Box 740463  City Cincinnati State OH Zip Code 45274  Purpose of Disbursement Phone service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.13657 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 1776.28  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) EZ Pass  Mailing Address PO Box 52001  City Newark State NJ Zip Code 07101  Purpose of Disbursement Tolls (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.13765 Date of Disbursement 10 / 16 / 2008  Amount of Each Disbursement this Period 25.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1806.71

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) EZ Pass  Mailing Address PO Box 52001  City Newark State NJ Zip Code 07101  Purpose of Disbursement Tolls (Reimb Other) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13764 Date of Disbursement 10 / 24 / 2008  Amount of Each Disbursement this Period 13.80  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx  Mailing Address 13155 Noel Rd Ste 1600  City Dallas State TX Zip Code 75240  Purpose of Disbursement Shipping (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13686 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 23.19  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Franklin Mutual Insurance Co  Mailing Address PO Box 400  City Branchville State NJ Zip Code 07826  Purpose of Disbursement Insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13712 Date of Disbursement 10 / 17 / 2008  Amount of Each Disbursement this Period 59.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	59.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Amanda Gasperino</p> <p>Mailing Address 115 Sussex St</p> <p>City Westfield State NJ Zip Code 07090</p> <p>Purpose of Disbursement Mileage</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13767</p> <p>Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 571.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Amanda Gasperino</p> <p>Mailing Address 115 Sussex St</p> <p>City Westfield State NJ Zip Code 07090</p> <p>Purpose of Disbursement Payroll (Payroll Account)</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13768</p> <p>Date of Disbursement 10 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 3880.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Amanda Gasperino</p> <p>Mailing Address 115 Sussex St</p> <p>City Westfield State NJ Zip Code 07090</p> <p>Purpose of Disbursement Mileage</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13769</p> <p>Date of Disbursement 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 357.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

929.27

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Amanda Gasperino</p> <p>Mailing Address 115 Sussex St</p> <p>City Westfield State NJ Zip Code 07090</p> <p>Purpose of Disbursement [Reimb Other] see memo</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13770</p> <p>Date of Disbursement</p> <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>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">152.93</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0	8	152.93
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	3	/	2	0	0	8													
152.93																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Glen Rock Hot Bagels</p> <p>Mailing Address 24-18 Maple Ave</p> <p>City Fair Lawn State NJ Zip Code 07410</p> <p>Purpose of Disbursement Volunteer food and beverage (Reimb Caitl)</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14022</p> <p>Date of Disbursement</p> <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>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">54.96</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	0	8	54.96
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	1	/	2	0	0	8													
54.96																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Halloween Adventure</p> <p>Mailing Address 42 N Route 17</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Campaign Supplies (Amex Card)</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14030</p> <p>Date of Disbursement</p> <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>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">18.49</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0	8	18.49
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	8													
18.49																						

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

152.93
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Elizabeth Heghinian  Mailing Address 52 Howard Park Dr  City Tenafly State NJ Zip Code 07670  Purpose of Disbursement GOTV door to door  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13876 Date of Disbursement 11 / 04 / 2008  Amount of Each Disbursement this Period 75.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Hoboken Parking Authority  Mailing Address 1 Hudson Pl  City Hoboken State NJ Zip Code 07030  Purpose of Disbursement Parking (Reimb Caitlin Selby)  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.14026 Date of Disbursement 11 / 02 / 2008  Amount of Each Disbursement this Period 16.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Holiday Inn Express  Mailing Address 50 N Route 17  City Paramus State NJ Zip Code 07652  Purpose of Disbursement Lodging (Amex Card)  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13749 Date of Disbursement 11 / 01 / 2008  Amount of Each Disbursement this Period 149.49  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Holiday Inn Express</p> <p>Mailing Address 50 N Route 17</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Lodging (Amex Card)</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13750</p> <p>Date of Disbursement 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 916.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rachel Houston</p> <p>Mailing Address 6215 Kilmer St</p> <p>City Cheverly State MD Zip Code 20785</p> <p>Purpose of Disbursement Mileage</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13944</p> <p>Date of Disbursement 11 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 257.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JBlast.com</p> <p>Mailing Address 6922 Hollywood Blvd Ste 500</p> <p>City Los Angeles State CA Zip Code 90028</p> <p>Purpose of Disbursement Advertising (Amex Card)</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13890</p> <p>Date of Disbursement 10 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

257.40

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JC's Grill House	Transaction ID: SB17.13772
	Mailing Address 144 Spring St	Date of Disbursement 10 / 25 / 2008
	City Newton State NJ Zip Code 07860	Amount of Each Disbursement this Period 52.95
	Purpose of Disbursement Volunteer food and beverage (Amex Card)	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) JC's Grill House	Transaction ID: SB17.13773
	Mailing Address 144 Spring St	Date of Disbursement 11 / 05 / 2008
	City Newton State NJ Zip Code 07860	Amount of Each Disbursement this Period 243.45
	Purpose of Disbursement Event facility, food, and beverage (Amex)	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Keel Systems	Transaction ID: SB17.13649
	Mailing Address 23812 Tres Coronas	Date of Disbursement 10 / 20 / 2008
	City Spicewood State TX Zip Code 78669	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement Accounting services	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Keel Systems Mailing Address 23812 Tres Coronas City Spicewood State TX Zip Code 78669 Purpose of Disbursement Accounting services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13650 Date of Disbursement 11 / 07 / 2008 Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Kiku Restaurant Mailing Address 365 N Route 17 City Paramus State NJ Zip Code 07652 Purpose of Disbursement Event facility, food, and beverage (Amex) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13905 Date of Disbursement 09 / 27 / 2008 Amount of Each Disbursement this Period 2752.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Steve Kramer Mailing Address 60 W 14th St City New York State NY Zip Code 10011 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.14036 Date of Disbursement 11 / 12 / 2008 Amount of Each Disbursement this Period 3000.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**3750.85**

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

.....



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Lakeland Bank Mailing Address 250 Oak Ridge Road City Oak Ridge State NJ Zip Code 07438 Purpose of Disbursement Bank Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13641 Date of Disbursement 10 / 23 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Lakeland Bank Mailing Address 250 Oak Ridge Road City Oak Ridge State NJ Zip Code 07438 Purpose of Disbursement Bank Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13639 Date of Disbursement 10 / 28 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Lakeland Bank Mailing Address 250 Oak Ridge Road City Oak Ridge State NJ Zip Code 07438 Purpose of Disbursement Bank Charge Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13640 Date of Disbursement 10 / 28 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Matthew Lambert, Sr.</p> <p>Mailing Address 466 S Main St</p> <p>City Phillipsburg State NJ Zip Code 08865</p> <p>Purpose of Disbursement GOTV door to door</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14006 <b>Date of Disbursement</b> 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 249.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Matthew Lambert, Jr.</p> <p>Mailing Address 466 S Main St Apt C</p> <p>City Phillipsburg State NJ Zip Code 08865</p> <p>Purpose of Disbursement GOTV door to door</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14007 <b>Date of Disbursement</b> 11 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 249.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Lark Design</p> <p>Mailing Address 629 Batts Switch Rd</p> <p>City Pen Argyl State PA Zip Code 18072</p> <p>Purpose of Disbursement Website Design And Maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13774 <b>Date of Disbursement</b> 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 3581.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4079.25

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Pam Lazzaro

Mailing Address 473 Ridge Rd

City Newton State NJ Zip Code 07860

Purpose of Disbursement  
Payroll (Payroll Account)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13758  
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

1704.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Le Bon Cafe

Mailing Address 210 2nd St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and beverage for event (Reimb Caitl)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.14032  
Date of Disbursement

10 / 21 / 2008

Amount of Each Disbursement this Period

64.46

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Liberty Writing Solutions

Mailing Address 18 Myrtle Ave

City Madison State NJ Zip Code 07940

Purpose of Disbursement  
Press Services

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13766  
Date of Disbursement

11 / 10 / 2008

Amount of Each Disbursement this Period

1160.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1160.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 154

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Lorrie MacKenzie  Mailing Address 32 Underrock Rd  City Sparta State NJ Zip Code 07871  Purpose of Disbursement Payroll (Payroll Account) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13708 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 785.18  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Mackenzie Marketing  Mailing Address 32 Underrock Rd  City Sparta State NJ Zip Code 07871  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13759 Date of Disbursement 11 / 12 / 2008  Amount of Each Disbursement this Period 1015.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Media Ad Ventures, Inc.  Mailing Address 8136 Old Keene Mill Rd Ste A300  City Springfield State VA Zip Code 22152  Purpose of Disbursement Advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13922 Date of Disbursement 10 / 28 / 2008  Amount of Each Disbursement this Period 70000.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**71015.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) My Campaign Store	Transaction ID: SB17.13778 Date of Disbursement 09 / 24 / 2008
	Mailing Address PO Box 596	Amount of Each Disbursement this Period 406.78
	City Jeffersonville State IN Zip Code 47131	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Supplies (Amex Card) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) National Political Associates, Inc.	Transaction ID: SB17.13924 Date of Disbursement 11 / 03 / 2008
	Mailing Address PO Box 2204	Amount of Each Disbursement this Period 10920.00
	City Washington State DC Zip Code 20013	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraising Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Newtown Restaurant	Transaction ID: SB17.13926 Date of Disbursement 11 / 04 / 2008
	Mailing Address 55 Mill St	Amount of Each Disbursement this Period 36.06
	City Newtown State NJ Zip Code 07860	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10920.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Amy Nittolo Mailing Address 294 Springbrook Trl City Sparta State NJ Zip Code 07871 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13815 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 225.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) NJ Law Enforcement Supervisors Association Mailing Address 201 Delaware Ave City Roebling State NJ Zip Code 08554 Purpose of Disbursement Ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13932 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) NJ State Firefighters Association Mailing Address 24 W Lafayette St City Trenton State NJ Zip Code 08608 Purpose of Disbursement Ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13934 Date of Disbursement 10 / 17 / 2008 Amount of Each Disbursement this Period 395.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**970.00**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Frank Oguru Mailing Address 221 N 24th St City Kenilworth State NJ Zip Code 07033 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13777 Date of Disbursement 11 / 10 / 2008 Amount of Each Disbursement this Period 319.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Vera Olinski Mailing Address 2 Laurel Lake Rd City Highland Lks State NJ Zip Code 07422 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13990 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Oxford Health Mailing Address 48 Monroe Tpke City Trumbull State CT Zip Code 06611 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13779 Date of Disbursement 11 / 03 / 2008 Amount of Each Disbursement this Period 713.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**1332.84**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) Pathmark Mailing Address 450 Hackensack Ave City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Office supplies (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.14034 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 8
	Amount of Each Disbursement this Period 4.26
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<b>[MEMO ITEM]</b>
	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 3060 Williams Drive, Suite 300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement [Payroll Account] see memo Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13651 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 16680.21
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address 3060 Williams Drive, Suite 300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13652 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 7240.23
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	23920.44
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Paychex Mailing Address 3060 Williams Drive, Suite 300 City Fairfax State VA Zip Code 22031 Purpose of Disbursement Payroll service fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13653 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8 Amount of Each Disbursement this Period 327.33 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Ashley Pettet Mailing Address 94 Tremont Ter City Wanaque State NJ Zip Code 07465 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13825 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Denise Pettet Mailing Address 94 Tremont Ter City Wanaque State NJ Zip Code 07465 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13864 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>927.33</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Kristen Pettet <hr/> Mailing Address 94 Tremont Ter <hr/> City Wanaque State NJ Zip Code 07465 <hr/> Purpose of Disbursement GOTV door to door <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.13907 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 300.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Shkelqim Pilinsi <hr/> Mailing Address 138 Old Changebridge Rd <hr/> City Montville State NJ Zip Code 07045 <hr/> Purpose of Disbursement GOTV door to door <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.13963 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 300.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Poland Spring Water <hr/> Mailing Address PO Box 856192 <hr/> City Louisville State KY Zip Code 40285 <hr/> Purpose of Disbursement Food and beverage (Amex Card) <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.13762 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 89.02 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Poland Spring Water  Mailing Address PO Box 856192  City Louisville State KY Zip Code 40285  Purpose of Disbursement Food and beverage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13763 Date of Disbursement 11 / 18 / 2008  Amount of Each Disbursement this Period 95.30  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Postmaster  Mailing Address 39 Main St  City Newton State NJ Zip Code 07860  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13692 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 12482.48  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Public Opinion Strategies, L.L.C.  Mailing Address 277 S Washington St Ste 320  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Survey Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13675 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 4500.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16982.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13780 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 32544.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13781 Date of Disbursement 10 / 23 / 2008 <hr/> Amount of Each Disbursement this Period 84660.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13782 Date of Disbursement 10 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 121322.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

238527.39

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Revolution Media Group <hr/> Mailing Address 1090 Vermont Ave NW Ste 230 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13783 Date of Disbursement 11 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 1335.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) R Z C Impact <hr/> Mailing Address 488 E Shore Trl <hr/> City Sparta State NJ Zip Code 07871 <hr/> Purpose of Disbursement Campaign Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13940 Date of Disbursement 11 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Olga Segreaus <hr/> Mailing Address 2616 Nazareth Rd <hr/> City Easton State PA Zip Code 18045 <hr/> Purpose of Disbursement GOTV door to door Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13938 Date of Disbursement 11 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 249.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3334.30</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Caitlin Selby  Mailing Address 122 Hope Rd  City Blairstown State NJ Zip Code 07825  Purpose of Disbursement Payroll (Payroll Account) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13696 Date of Disbursement <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>1</td><td>0</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>2596.45</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	3	1	/	2	0	0	8	2596.45
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	3	1	/	2	0	0	8														
2596.45																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Caitlin Selby  Mailing Address 122 Hope Rd  City Blairstown State NJ Zip Code 07825  Purpose of Disbursement Mileage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13697 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>1918.87</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0	8	1918.87
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	3	/	2	0	0	8														
1918.87																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Caitlin Selby  Mailing Address 122 Hope Rd  City Blairstown State NJ Zip Code 07825  Purpose of Disbursement [Reimb Caitlin Selby] see memo Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13698 Date of Disbursement <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>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>172.42</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0	8	172.42
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	3	/	2	0	0	8														
172.42																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td>2091.29</td> </tr> </table>	2091.29
2091.29		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Calvin Selby Mailing Address 122 Hope Rd City Blairstown State NJ Zip Code 07825 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13833 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Linna Selby Mailing Address 122 Hope Road City Blairstown State NJ Zip Code 07825 Purpose of Disbursement Payroll (Payroll Account) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13654 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 5307.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Shop Rite Mailing Address 125 Water St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13688 Date of Disbursement 10 / 18 / 2008 Amount of Each Disbursement this Period 32.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Shop Rite Mailing Address 125 Water St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13689 Date of Disbursement 10 / 26 / 2008 Amount of Each Disbursement this Period 84.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Shop Rite Mailing Address 125 Water St City Newton State NJ Zip Code 07860 Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13690 Date of Disbursement 11 / 02 / 2008 Amount of Each Disbursement this Period 27.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) William Smith Mailing Address PO Box 351 City Hewitt State NJ Zip Code 07421 Purpose of Disbursement GOTV door to door Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13994 Date of Disbursement 11 / 06 / 2008 Amount of Each Disbursement this Period 225.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**225.00**

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

.....



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Staples - Newton <hr/> Mailing Address 1 Hampton House Rd <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement Office supplies (Amex Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13659 Date of Disbursement <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>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>149.79</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	0	8	149.79
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	9		2	0	0	8														
149.79																							
<b>B.</b>	Full Name (Last, First, Middle Initial) Staples - Newton <hr/> Mailing Address 1 Hampton House Rd <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement Office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13658 Date of Disbursement <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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>653.25</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	8	653.25
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	8														
653.25																							
<b>C.</b>	Full Name (Last, First, Middle Initial) Staples - Newton <hr/> Mailing Address 1 Hampton House Rd <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement Office supplies (Amex Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13661 Date of Disbursement <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>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>108.19</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	8	108.19
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	2		2	0	0	8														
108.19																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1"> <tr> <td>653.25</td> </tr> </table>	653.25
653.25		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1"> <tr> <td> </td> </tr> </table>	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Staples - Newton

Mailing Address 1 Hampton House Rd

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Office supplies (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13660  
Date of Disbursement

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

Amount of Each Disbursement this Period

147.11
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Staples - Newton

Mailing Address 1 Hampton House Rd

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Office supplies (BA Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13663  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	8

Amount of Each Disbursement this Period

8.13
------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Starboard Enterprises, LLC

Mailing Address 83 Spring St

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Rent

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13760  
Date of Disbursement

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

Amount of Each Disbursement this Period

2600.00
---------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Starboard Enterprises, LLC  Mailing Address 83 Spring St  City Newton State NJ Zip Code 07860  Purpose of Disbursement Rent  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13761 Date of Disbursement 11 / 07 / 2008  Amount of Each Disbursement this Period 2600.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Theresa Struck  Mailing Address 100 Edward Dr  City Ringwood State NJ Zip Code 07456  Purpose of Disbursement GOTV door to door  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13980 Date of Disbursement 11 / 06 / 2008  Amount of Each Disbursement this Period 225.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Subway  Mailing Address 335c Main St  City Hackensack State NJ Zip Code 07601  Purpose of Disbursement Volunteer food and beverage (Amex Card)  Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13748 Date of Disbursement 11 / 01 / 2008  Amount of Each Disbursement this Period 187.25  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2825.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Subway

Mailing Address 335c Main St

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement  
Volunteer food and beverage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13747  
Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

37.45

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Sussex County Republican Committee

Mailing Address PO Box 2456

City Branchville State NJ Zip Code 07826

Purpose of Disbursement  
Tickets

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13664  
Date of Disbursement

10 / 22 / 2008

Amount of Each Disbursement this Period

450.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Sussex Skyhawks

Mailing Address 94 Championship Pl

City Augusta State NJ Zip Code 07822

Purpose of Disbursement  
Event facility, food, and beverage (Amex)

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13728  
Date of Disbursement

09 / 26 / 2008

Amount of Each Disbursement this Period

22.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... ►

450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc <hr/> Mailing Address 106 S Columbus St <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13791 Date of Disbursement 10 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 4200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc <hr/> Mailing Address 106 S Columbus St <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13792 Date of Disbursement 11 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 9742.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) TC Graphics <hr/> Mailing Address 109 South Avenue, West <hr/> City Cranford State NJ Zip Code 07016 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13665 Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 3105.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

17047.20

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) Oksana Tereshchenko</p> <p>Mailing Address 810 Columbus Ave</p> <p>City Phillipsburg State NJ Zip Code 08865</p> <p>Purpose of Disbursement GOTV door to door</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13936</p> <p>Date of Disbursement 11 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 249.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Blue Iris Cafe</p> <p>Mailing Address 129 Spring St</p> <p>City Newton State NJ Zip Code 07860</p> <p>Purpose of Disbursement Event facility, food, and beverage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.13756</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 389.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Total Wine And More</p> <p>Mailing Address 135 Kinderkamack Rd</p> <p>City River Edge State NJ Zip Code 07661</p> <p>Purpose of Disbursement Volunteer food and beverage (Reimb Caitl)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.14024</p> <p>Date of Disbursement 11 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 13.97</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

638.16

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Town of Hoboken

Mailing Address 100 Newark St

City Hoboken State NJ Zip Code 07030

Purpose of Disbursement  
Parking (Reimb Other)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.14018  
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

21.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Town of Newton

Mailing Address 39 Trinity St

City Newton State NJ Zip Code 07860

Purpose of Disbursement  
Parking (Reimb Other)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13695  
Date of Disbursement

11 / 05 / 2008

Amount of Each Disbursement this Period

71.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Mr. Russell P. Trocano, Esq.

Mailing Address 60 South Maple Ave

City Ridgewood State NJ Zip Code 07450

Purpose of Disbursement  
In-kind - food and beverage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.14042  
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

875.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

875.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 144 / 154

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

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)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Matt Turkstra <hr/> Mailing Address 4380 King St Apt 1408 <hr/> City Alexandria State VA Zip Code 22302 <hr/> Purpose of Disbursement Mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13920 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 257.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Turner Marketing Inc. <hr/> Mailing Address 160 Meister Ave Ste 21 <hr/> City Branchburg State NJ Zip Code 08876 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13793 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 22639.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Turner Marketing Inc. <hr/> Mailing Address 160 Meister Ave Ste 21 <hr/> City Branchburg State NJ Zip Code 08876 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13794 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 22639.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>45537.24</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Turner Marketing Inc.	<b>Transaction ID:</b> SB17.13795
	Mailing Address 160 Meister Ave Ste 21	Date of Disbursement 10 / 24 / 2008
	City Branchburg State NJ Zip Code 08876	Amount of Each Disbursement this Period 18149.15
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Turner Marketing Inc.	<b>Transaction ID:</b> SB17.13796
	Mailing Address 160 Meister Ave Ste 21	Date of Disbursement 10 / 28 / 2008
	City Branchburg State NJ Zip Code 08876	Amount of Each Disbursement this Period 50586.81
	Purpose of Disbursement Postage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tuscany Pizza	<b>Transaction ID:</b> SB17.13985
	Mailing Address 61 W 55th St	Date of Disbursement 10 / 20 / 2008
	City New York State NY Zip Code 10019	Amount of Each Disbursement this Period 219.11
	Purpose of Disbursement Event food and beverage (Amex Card) Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

68735.96

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB17.13738 Date of Disbursement 09 / 22 / 2008
	Mailing Address 143 E Ridgewood Ave	Amount of Each Disbursement this Period 16.50
	City Ridgewood State NJ Zip Code 07450	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage (Amex Card) Candidate Name	<input type="checkbox"/> [MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB17.13735 Date of Disbursement 09 / 25 / 2008
	Mailing Address 143 E Ridgewood Ave	Amount of Each Disbursement this Period 1050.00
	City Ridgewood State NJ Zip Code 07450	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage (Amex Card) Candidate Name	<input type="checkbox"/> [MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SB17.13737 Date of Disbursement 10 / 03 / 2008
	Mailing Address 143 E Ridgewood Ave	Amount of Each Disbursement this Period 840.00
	City Ridgewood State NJ Zip Code 07450	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage (Amex Card) Candidate Name	<input type="checkbox"/> [MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address 143 E Ridgewood Ave

City Ridgewood State NJ Zip Code 07450

Purpose of Disbursement  
Postage (BA Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13743  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	8

Amount of Each Disbursement this Period

84.00
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address 143 E Ridgewood Ave

City Ridgewood State NJ Zip Code 07450

Purpose of Disbursement  
Postage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13734  
Date of Disbursement

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

Amount of Each Disbursement this Period

16.50
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
USPS

Mailing Address 143 E Ridgewood Ave

City Ridgewood State NJ Zip Code 07450

Purpose of Disbursement  
Postage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13739  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Amount of Each Disbursement this Period

12.60
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13731 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8  Amount of Each Disbursement this Period 840.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13742 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 8  Amount of Each Disbursement this Period 12.60  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13741 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8  Amount of Each Disbursement this Period 33.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	840.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) USPS Mailing Address 143 E Ridgewood Ave City Ridgewood State NJ Zip Code 07450 Purpose of Disbursement Postage (Reimb Other) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13744 Date of Disbursement 10 / 28 / 2008 Amount of Each Disbursement this Period 39.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) USPS Mailing Address 143 E Ridgewood Ave City Ridgewood State NJ Zip Code 07450 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13732 Date of Disbursement 10 / 30 / 2008 Amount of Each Disbursement this Period 3150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address 143 E Ridgewood Ave City Ridgewood State NJ Zip Code 07450 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13733 Date of Disbursement 10 / 30 / 2008 Amount of Each Disbursement this Period 2520.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

5670.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13740 Date of Disbursement 10 / 31 / 2008  Amount of Each Disbursement this Period 630.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13736 Date of Disbursement 11 / 04 / 2008  Amount of Each Disbursement this Period 16.50  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) USPS  Mailing Address 143 E Ridgewood Ave  City Ridgewood State NJ Zip Code 07450  Purpose of Disbursement Postage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13745 Date of Disbursement 11 / 04 / 2008  Amount of Each Disbursement this Period 13.02  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 489 City Newark State NJ Zip Code 07101 Purpose of Disbursement Cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13666 <b>Date of Disbursement</b> 10 / 17 / 2008 Amount of Each Disbursement this Period 718.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 489 City Newark State NJ Zip Code 07101 Purpose of Disbursement Cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13667 <b>Date of Disbursement</b> 10 / 17 / 2008 Amount of Each Disbursement this Period 137.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 489 City Newark State NJ Zip Code 07101 Purpose of Disbursement Cell phone charges (Amex Card) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.13668 <b>Date of Disbursement</b> 10 / 18 / 2008 Amount of Each Disbursement this Period 85.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**855.75**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Walmart - Newton  Mailing Address Hampton House Road  City Newton State NJ Zip Code 07860  Purpose of Disbursement Office supplies (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13670 Date of Disbursement 09 / 29 / 2008  Amount of Each Disbursement this Period 15.17  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Walmart - Newton  Mailing Address Hampton House Road  City Newton State NJ Zip Code 07860  Purpose of Disbursement Volunteer food and beverage (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13669 Date of Disbursement 10 / 06 / 2008  Amount of Each Disbursement this Period 46.98  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) Walmart - Newton  Mailing Address Hampton House Road  City Newton State NJ Zip Code 07860  Purpose of Disbursement Office supplies (Amex Card) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13671 Date of Disbursement 10 / 10 / 2008  Amount of Each Disbursement this Period 24.71  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Walmart - Newton

Mailing Address Hampton House Road

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Volunteer food and beverage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13672  
Date of Disbursement

10 / 10 / 2008

Amount of Each Disbursement this Period

53.15

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Walmart - Newton

Mailing Address Hampton House Road

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Volunteer food and beverage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13674  
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

91.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
Walmart - Newton

Mailing Address Hampton House Road

City State Zip Code  
Newton NJ 07860

Purpose of Disbursement  
Volunteer food and beverage (Amex Card)

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.13673  
Date of Disbursement

11 / 01 / 2008

Amount of Each Disbursement this Period

96.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
SCOTT GARRETT FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Wilcox Press <hr/> Mailing Address 6 Main St <hr/> City Hamburg State NJ Zip Code 07419 <hr/> Purpose of Disbursement Printing (BA Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13693 Date of Disbursement 09 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 30.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) Wilcox Press <hr/> Mailing Address 6 Main St <hr/> City Hamburg State NJ Zip Code 07419 <hr/> Purpose of Disbursement Printing (BA Card) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13694 Date of Disbursement 10 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 13.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) William Zelko <hr/> Mailing Address 15 Route 206 S Apt 2 <hr/> City Sandyston State NJ Zip Code 07826 <hr/> Purpose of Disbursement GOTV door to door Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.13996 Date of Disbursement 11 / 06 / 2008 <hr/> Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

300.00

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

552540.76