

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

FRELINGHUYSEN FOR CONGRESS

ADDRESS (number and street) 19 CATTANO AVENUE

Check if different than previously reported. (ACC)

Morristown

NJ

07960-6839

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00299404

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

X

STATE DISTRICT

NJ

11

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 MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY

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 Leshner, Warren, J.,

Signature of Treasurer Leshner, Warren, J.,

[Electronically Filed]

Date

MM/DD/YYYY 04/13/2018

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

Table with 8 columns for Office Use Only

FEC FORM 3 (Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**FRELINGHUYSEN FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10475.00	1481562.84
(b) Total Contribution Refunds (from Line 20(d)) .....	237301.68	245696.68
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 226826.68	1235866.16
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	191153.83	842468.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	500.00	500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	190653.83	841968.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	740049.07	
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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**FRELINGHUYSEN FOR CONGRESS**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3025.00	561619.16
(ii) Unitemized.....	450.00	29612.00
(iii) TOTAL of contributions from individuals ▶	3475.00	591231.16
(b) Political Party Committees.....	0.00	2105.00
(c) Other Political Committees (such as PACs).....	7000.00	888226.68
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10475.00	1481562.84
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	84968.72
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	500.00	500.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	3.77	30.98
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	10978.77	1567062.54

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	191153.83	842468.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	75445.00	80345.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	161856.68	165351.68
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	237301.68	245696.68
21. OTHER DISBURSEMENTS .....	9150.00	275920.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	437605.51	1364084.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1166675.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10978.77
25. SUBTOTAL (add Line 23 and Line 24).....	1177654.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	437605.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	740049.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 69	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**FRELINGHUYSEN FOR CONGRESS**

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

Mailing Address 51 Wootton Road

City Essex Fells	State NJ	Zip Code 07021-1116
---------------------	-------------	------------------------

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

Name of Employer J Moore & Co	Occupation President
----------------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2018

**Transaction ID : A2F6A5B0AFB974E059EA**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ganske, John, , ,**

Mailing Address 5206 Waterbury Road

City Des Moines	State IA	Zip Code 50312-1922
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Doctor
--------------------------	----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 25 / 2018

**Transaction ID : A7FE00F1BC7D1497093C**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Nicoletos, Steven, , ,**

Mailing Address 80 Buckingham Road

City Montclair	State NJ	Zip Code 07043-2502
-------------------	-------------	------------------------

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

Name of Employer NVA	Occupation Accountant
-------------------------	--------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2018

**Transaction ID : A83E547CB78BE4701813**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2000.00
<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: (check only one)		PAGE 6 OF 69	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Powers, William J., , ,**

Mailing Address 4 Wycoff Way

City Mendham	State NJ	Zip Code 07945-2943
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Author
--------------------------	----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2018

**Transaction ID : AA9FCC9C5F6CF4522BAF**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rentzis, Peter, , ,**

Mailing Address 80 Oak Lane

City Essex Fells	State NJ	Zip Code 07021-1311
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2018

**Transaction ID : AA441251257754E2D87A**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Venin, Ekamon, , ,**

Mailing Address 4 Sunset Road

City Pompton Lakes	State NJ	Zip Code 07442-1628
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FEC ID number of contributing federal political committee. **C**

Name of Employer UPS	Occupation Software Developer
-------------------------	----------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2018

**Transaction ID : A3B0A80F88BC343E3BA1**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1025.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	3025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 69	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Deciding Critical Races PAC (DCR PAC)**

Mailing Address PO Box 701

City Clayton	State NC	Zip Code 27528-0701
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FEC ID number of contributing federal political committee. **C** C00577288

Name of Employer	Occupation
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Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2018

**Transaction ID : AF2F4F9AA79684D889B0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Eureka PAC**

Mailing Address PO Box 30844

City Bethesda	State MD	Zip Code 20824-0844
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FEC ID number of contributing federal political committee. **C** C00390161

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 16 / 2018

**Transaction ID : A28E479B7308A415B9F5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C** \_\_\_\_\_

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 7000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____ 7000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 8 OF 69	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**The Hartford**

Mailing Address P.O. Box 2907

City Hartford	State CT	Zip Code 06104-2907
------------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2018

**Transaction ID : A39115F09A2404407A64**

Amount of Each Receipt this Period  
500.00

Memo Item  
 Final Audit Refund

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00



**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)	PAGE 9 OF 69			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 25 / 2018
Mailing Address 5555 Hilton Avenue, Suite 106		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 87.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B1C6D0079A8F641749C6 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018
Mailing Address 5555 Hilton Avenue, Suite 106		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1.28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B6A07363DB6F5468DB62 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address 5555 Hilton Avenue, Suite 106		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70808
Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 4.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B39507D597C8D4249B6A <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	92.78
<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)		PAGE 10 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2018
Mailing Address 205 Pennsylvania Avenue, SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Maintenance/Support	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2100.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B63A3A160C8C04ACCB98 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2018
Mailing Address 188 South Street		FEC Identification Number C
City Morristown	State NJ	Zip Code 07960
Purpose of Disbursement Bank Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BCC34F14B59D342B5AC1 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018
Mailing Address 188 South Street		FEC Identification Number C
City Morristown	State NJ	Zip Code 07960
Purpose of Disbursement Bank Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 49.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B0CA6573D82434AA9942 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2179.00
<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)		PAGE 11 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ceridian Small Business</b>		Date of Disbursement
Mailing Address 3311 E. Old Shakopee Road		M M / D D / Y Y Y Y 01 / 07 / 2018
City Bloomington	State MN	Zip Code 55425
Purpose of Disbursement Payroll Service	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 39.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B10B1D549ADCC4C7597A
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Ceridian Small Business</b>		Date of Disbursement
Mailing Address 3311 E. Old Shakopee Road		M M / D D / Y Y Y Y 01 / 12 / 2018
City Bloomington	State MN	Zip Code 55425
Purpose of Disbursement Payroll Service	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD3FC1BFFE54B40A1A38
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Ceridian Small Business</b>		Date of Disbursement
Mailing Address 3311 E. Old Shakopee Road		M M / D D / Y Y Y Y 01 / 16 / 2018
City Bloomington	State MN	Zip Code 55425
Purpose of Disbursement Payroll Taxes	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 148.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BFD689CB8CC4C4E9FAE0
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	213.40
<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)		PAGE 12 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2018	
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C	
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 200.46	
Purpose of Disbursement Payroll Service		Category/ Type 001	Transaction ID : B1C54E34493784582B10	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2018	
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C	
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 39.64	
Purpose of Disbursement Payroll Service		Category/ Type 001	Transaction ID : BA74339A385DA4A538B9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018	
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C	
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 148.73	
Purpose of Disbursement Payroll Taxes		Category/ Type 001	Transaction ID : BCD847DD7BE124B5194A	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	388.83
<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)	PAGE 13 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A. Ceridian Small Business**

Full Name (Last, First, Middle Initial)

Mailing Address 3311 E. Old Shakopee Road

City Bloomington State MN Zip Code 55425

Purpose of Disbursement Payroll Service Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 08 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 39.64

Transaction ID : B764F4CFEC0DD4F6D9E7

Memo Item

**B. Ceridian Small Business**

Full Name (Last, First, Middle Initial)

Mailing Address 3311 E. Old Shakopee Road

City Bloomington State MN Zip Code 55425

Purpose of Disbursement Payroll Taxes Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 15 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 148.76

Transaction ID : BAAF9E9FB7993448C8C8

Memo Item

**c. Ceridian Small Business**

Full Name (Last, First, Middle Initial)

Mailing Address 3311 E. Old Shakopee Road

City Bloomington State MN Zip Code 55425

Purpose of Disbursement Payroll Service Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 24 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 46.39

Transaction ID : B7F99E4D0E8484BEEA2E

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 234.79

**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 14 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018		
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C		
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 148.75		
Purpose of Disbursement Payroll Taxes		Category/ Type 001	Transaction ID : B936550355B42402CB31		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2018		
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C		
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 39.64		
Purpose of Disbursement Payroll Service		Category/ Type 001	Transaction ID : B9CAAE5ED81F64BC89D4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Ceridian Small Business</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018		
Mailing Address 3311 E. Old Shakopee Road			FEC Identification Number C		
City Bloomington	State MN	Zip Code 55425	Amount of Each Disbursement this Period 147.00		
Purpose of Disbursement Payroll Taxes		Category/ Type 001	Transaction ID : B2EAB7FA8FC7A49B48E2		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	335.39
<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)		PAGE 15 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ceridian Small Business</b>		Date of Disbursement
Mailing Address 3311 E. Old Shakopee Road		M M / D D / Y Y Y Y 03 / 24 / 2018
City Bloomington	State MN	Zip Code 55425
Purpose of Disbursement Payroll Service		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 53.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9ECE8CB51D364DCCB74
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Ceridian Small Business</b>		Date of Disbursement
Mailing Address 3311 E. Old Shakopee Road		M M / D D / Y Y Y Y 03 / 30 / 2018
City Bloomington	State MN	Zip Code 55425
Purpose of Disbursement Payroll Taxes		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 122.49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BEA5F93DA6D984FEDAD8
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Chabad Center of Northwest NJ</b>		Date of Disbursement
Mailing Address One Torah Way		M M / D D / Y Y Y Y 01 / 03 / 2018
City Rockaway	State NJ	Zip Code 07866
Purpose of Disbursement Ad Journal		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 360.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B145D7864E470470DAC1
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	535.63
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A. Constant Contact**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Trapelo Road  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement News Service Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 01 / 17 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 65.00

Transaction ID : B5F2579494B63458482A

Memo Item

**B. Constant Contact**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Trapelo Road  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement News Service Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 02 / 20 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 65.00

Transaction ID : B64C67E2E48D14BDF9AE

Memo Item

**c. Constant Contact**

Full Name (Last, First, Middle Initial)

Mailing Address 1601 Trapelo Road  
Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement News Service Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 03 / 19 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 70.00

Transaction ID : B8DDF133B572D405185A

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 200.00

**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 17 OF 69			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Day Parade Cmte, Morris Plains Memori, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2018		
Mailing Address Borough of Morris Plains 531 Speedwell Avenue			FEC Identification Number C		
City Morris Plains	State NJ	Zip Code 07950	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement Ad Journal		Category/ Type 004	Transaction ID : B9BCC6CF30B324FF9906		
Candidate Name		Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018		
Mailing Address P.O. Box 371461			FEC Identification Number C		
City Pittsburgh	State PA	Zip Code 15250-7461	Amount of Each Disbursement this Period 27.50		
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B8051D63D5A8249D9B4A		
Candidate Name		Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2018		
Mailing Address P.O. Box 371461			FEC Identification Number C		
City Pittsburgh	State PA	Zip Code 15250-7461	Amount of Each Disbursement this Period 115.34		
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : B84F97E5FBF27403EAC2		
Candidate Name		Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	342.84
<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)	PAGE 18 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018		
Mailing Address P.O. Box 371461			FEC Identification Number C		
City Pittsburgh	State PA	Zip Code 15250-7461	Amount of Each Disbursement this Period 100.11		
Purpose of Disbursement Shipping		Category/ Type 001	Transaction ID : <b>BD6BF5AE848154648B5D</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Fulcrum Campaign Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2018		
Mailing Address 220 Lenox Avenue Suite 101			FEC Identification Number C		
City Westfield	State NJ	Zip Code 07090-5119	Amount of Each Disbursement this Period 15549.50		
Purpose of Disbursement Mailers		Category/ Type 003	Transaction ID : <b>BFFBFEE64BC547FC94D</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Fulcrum Campaign Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2018		
Mailing Address 220 Lenox Avenue Suite 101			FEC Identification Number C		
City Westfield	State NJ	Zip Code 07090-5119	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Consulting Services - Political		Category/ Type 003	Transaction ID : <b>B1DE181363F744FC6B69</b>		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20649.61
<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)	PAGE 19 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Fulcrum Campaign Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2018		
Mailing Address 220 Lenox Avenue Suite 101			FEC Identification Number C		
City Westfield	State NJ	Zip Code 07090-5119	Amount of Each Disbursement this Period 4957.45		
Purpose of Disbursement Mailer		Category/ Type 003	Transaction ID : B247AE1E7BFB34FE7913		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Fulcrum Campaign Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2018		
Mailing Address 220 Lenox Avenue Suite 101			FEC Identification Number C		
City Westfield	State NJ	Zip Code 07090-5119	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Consulting Services - Political		Category/ Type 003	Transaction ID : BF4C970796FDB4762B4C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Fulcrum Campaign Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 09 / 2018		
Mailing Address 220 Lenox Avenue Suite 101			FEC Identification Number C		
City Westfield	State NJ	Zip Code 07090-5119	Amount of Each Disbursement this Period 25559.76		
Purpose of Disbursement Production for Mailers		Category/ Type 003	Transaction ID : BFCB48CC422274BF4A68		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	35517.21
<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)		PAGE 20 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Fulcrum Campaign Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2018
Mailing Address 220 Lenox Avenue Suite 101		FEC Identification Number C
City Westfield	State NJ	Zip Code 07090-5119
Purpose of Disbursement Consulting Services - Political	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB8BAF418E8414CAEB60
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Hill Club, Capitol, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2018
Mailing Address 300 1st Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Event Receptions	Category/ Type 007	
Candidate Name		Amount of Each Disbursement this Period 2409.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B38FDF68E4DF4162BAB
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Hummel Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2018
Mailing Address 850 Springfield Road		FEC Identification Number C
City Union	State NJ	Zip Code 07083-8614
Purpose of Disbursement Postage for Mailer	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 2472.66
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD5AEAD2197874501812
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9881.88
<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)		PAGE 21 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A. Leshner, Franchino & Company LLP**

Full Name (Last, First, Middle Initial)

Mailing Address Chancery Square  
19 Cattano Avenue

City Morristown State NJ Zip Code 07960

Purpose of Disbursement Accounting Services Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 19 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 2598.48

Transaction ID : B66A51493893A4E7681D

Memo Item

**B. Leshner, Franchino & Company LLP**

Full Name (Last, First, Middle Initial)

Mailing Address Chancery Square  
19 Cattano Avenue

City Morristown State NJ Zip Code 07960

Purpose of Disbursement Accounting Services Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 09 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 3860.58

Transaction ID : B12D6BF7520A048CEA4A

Memo Item

**C. Leshner, Franchino & Company LLP**

Full Name (Last, First, Middle Initial)

Mailing Address Chancery Square  
19 Cattano Avenue

City Morristown State NJ Zip Code 07960

Purpose of Disbursement Accounting Services Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 20 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 3150.59

Transaction ID : BD4E1E1791F654B6B8C2

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 9609.65

**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 22 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Morris County, The 200 Club of, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2018		
Mailing Address P.O. Box 4147			FEC Identification Number C		
City Toms River	State NJ	Zip Code 08756-4147	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Ad Journal		Category/ Type 004	Transaction ID : B7628FB3BAB9B4D468B4		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Nutley Irish American Assoc., Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018		
Mailing Address 209 Walnut Street			FEC Identification Number C		
City Nutley	State NJ	Zip Code 07110	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement Ad Journal		Category/ Type 004	Transaction ID : B362A75F93F6D42E597E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Revolution Media Group, L.L.C.</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018		
Mailing Address 1020 Princess Street			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 195.00		
Purpose of Disbursement Collected & Packed Web Files		Category/ Type 003	Transaction ID : B8CB04546D4F74F8899D		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	545.00
<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)	PAGE 23 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement Consultant-Fundraising		Category/ Type 003	Transaction ID : B46BA742520814011AF6
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Reimbursement for Space Rental		Category/ Type 003	Transaction ID : BBD37D48304A246A08F7
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 2113.02
Purpose of Disbursement Reimbursement for Catering Reception		Category/ Type 003	Transaction ID : BE36C5C33E9B14A169C1
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6363.02
<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)	PAGE 24 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement Consultant-Fundraising		Category/ Type 003	Transaction ID : BD2797EB36F6743D9954
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 4000.00
Purpose of Disbursement Consultant-Fundraising		Category/ Type 003	Transaction ID : B6537A8B9B67B4ADC859
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Rose Strategies, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2018
Mailing Address 2308 Mount Vernon Avenue, #337			FEC Identification Number C
City Alexandria	State VA	Zip Code 22301-1328	Amount of Each Disbursement this Period 69502.00
Purpose of Disbursement Consultant-Commission		Category/ Type 003	Transaction ID : B440F6155E2504DE9BEF
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	77502.00
<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)		PAGE 25 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. St. Patricks Day Parade of Morris Cty I</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address c/o Morristown Financial Group P.O. Box 1353		FEC Identification Number C
City Morristown	State NJ	Zip Code 07962-1353
Purpose of Disbursement Ad Journal	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 125.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9E8C719DCB4C4C54821
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Staples Credit Plan</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018
Mailing Address PO Box 78004		FEC Identification Number C
City Phoenix	State AZ	Zip Code 85062-8004
Purpose of Disbursement Office Supplies	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 24.51	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B76E80277B7624EB0930
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Sullivan, Timothy, J., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2018
Mailing Address 17 Hawthorne Road		FEC Identification Number C
City Essex Fells	State NJ	Zip Code 07021-1411
Purpose of Disbursement Salary	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 1458.33	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE156CFB8FD9F466E95B
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1607.84
<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)		PAGE 26 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sullivan, Timothy, J., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address 17 Hawthorne Road		FEC Identification Number C
City Essex Fells	State NJ	Zip Code 07021-1411
Purpose of Disbursement Salary		001
Candidate Name		Amount of Each Disbursement this Period 1458.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA4922C3677134841874
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Sullivan, Timothy, J., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2018
Mailing Address 17 Hawthorne Road		FEC Identification Number C
City Essex Fells	State NJ	Zip Code 07021-1411
Purpose of Disbursement Salary		001
Candidate Name		Amount of Each Disbursement this Period 1458.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5D6108A294ED4CDB9EB
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Sullivan, Timothy, J., ,</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018
Mailing Address 17 Hawthorne Road		FEC Identification Number C
City Essex Fells	State NJ	Zip Code 07021-1411
Purpose of Disbursement Salary		001
Candidate Name		Amount of Each Disbursement this Period 1458.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B15CDF1A57467472D95D
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4374.99
<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)	PAGE 27 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Sullivan, Timothy, J., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2018		
Mailing Address 17 Hawthorne Road			FEC Identification Number C		
City Essex Fells	State NJ	Zip Code 07021-1411	Amount of Each Disbursement this Period 1458.33		
Purpose of Disbursement Salary		Category/ Type 001	Transaction ID : <b>BD816FF9157D9496D86F</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. Sullivan, Timothy, J., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2018		
Mailing Address 17 Hawthorne Road			FEC Identification Number C		
City Essex Fells	State NJ	Zip Code 07021-1411	Amount of Each Disbursement this Period 1458.33		
Purpose of Disbursement Salary		Category/ Type 001	Transaction ID : <b>BD3DEA23EF428463992F</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>c. The Congressional Institute</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2018		
Mailing Address 1700 Diagonal Road, Suite 730			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 736.84		
Purpose of Disbursement Conference		Category/ Type 001	Transaction ID : <b>BAE41A2F0E98244EC86D</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3653.50
<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)	PAGE 28 OF 69			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. The Hartford</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2018		
Mailing Address P.O. Box 2907			FEC Identification Number C		
City Hartford	State CT	Zip Code 06104-2907	Amount of Each Disbursement this Period 793.00		
Purpose of Disbursement Workers Compensation		Category/ Type 001	Transaction ID : B2A8972CC9872404BA8B		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Tusk Productions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2018		
Mailing Address 38 Lakewood Drive			FEC Identification Number C		
City Denville	State NJ	Zip Code 07834	Amount of Each Disbursement this Period 24.57		
Purpose of Disbursement Reimbursement for Dinner Event Cancellation		Category/ Type 003	Transaction ID : B92F0997BBBD84F4D8AA		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Tusk Productions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2018		
Mailing Address 38 Lakewood Drive			FEC Identification Number C		
City Denville	State NJ	Zip Code 07834	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement Consultant-Fundraising		Category/ Type 003	Transaction ID : BA74DB64E98514266A27		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4817.57
<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)	PAGE 29 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tusk Productions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
Mailing Address 38 Lakewood Drive			FEC Identification Number C		
City Denville	State NJ	Zip Code 07834	Amount of Each Disbursement this Period 65.43		
Purpose of Disbursement Reimbursement for Shipping		Category/ Type 003	Transaction ID : B85012DA4AAF744FFA61		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Tusk Productions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
Mailing Address 38 Lakewood Drive			FEC Identification Number C		
City Denville	State NJ	Zip Code 07834	Amount of Each Disbursement this Period 196.00		
Purpose of Disbursement Reimbursement for Postage		Category/ Type 003	Transaction ID : BF3D5A1958C15412F9F5		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Tusk Productions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
Mailing Address 38 Lakewood Drive			FEC Identification Number C		
City Denville	State NJ	Zip Code 07834	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement Consultant-Fundraising		Category/ Type 003	Transaction ID : B8F2F78494B134F098AA		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4261.43
<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)		PAGE 30 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tusk Productions, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018
Mailing Address 38 Lakewood Drive		FEC Identification Number C
City Denville	State NJ	Zip Code 07834
Purpose of Disbursement Consultant-Fundraising	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>BB17795A0310345B0B20</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2018
Mailing Address 1 Morris Street		FEC Identification Number C
City Morristown	State NJ	Zip Code 07960
Purpose of Disbursement P.O. Box Renewal Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 140.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>B059154C7740F4779B3F</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 11 / 2018
Mailing Address P.O. Box 408		FEC Identification Number C
City Newark	State NJ	Zip Code 07101-0408
Purpose of Disbursement Mobile Device	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 87.29
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : <b>B8FFD97442CAA465E8A2</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4227.29
<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)	PAGE 31 OF 69			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2018		
Mailing Address P.O. Box 408			FEC Identification Number C		
City Newark	State NJ	Zip Code 07101-0408	Amount of Each Disbursement this Period 87.25		
Purpose of Disbursement Mobile Device		Category/ Type 001	Transaction ID : <b>BD0CC360EC45C4663B18</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018		
Mailing Address P.O. Box 408			FEC Identification Number C		
City Newark	State NJ	Zip Code 07101-0408	Amount of Each Disbursement this Period 87.25		
Purpose of Disbursement Mobile Device		Category/ Type 001	Transaction ID : <b>BB6FC6988B10947E18D8</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2018		
Mailing Address P.O. Box 4833			FEC Identification Number C		
City Trenton	State NJ	Zip Code 08650-4833	Amount of Each Disbursement this Period 115.24		
Purpose of Disbursement Telephone Expense		Category/ Type 001	Transaction ID : <b>B5C56A338E2B4408A8E3</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	289.74
<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)	PAGE 32 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2018
Mailing Address P.O. Box 4833		FEC Identification Number C
City Trenton	State NJ	Zip Code 08650-4833
Purpose of Disbursement Telephone Expense	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 115.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2018
Mailing Address P.O. Box 4833		FEC Identification Number C
City Trenton	State NJ	Zip Code 08650-4833
Purpose of Disbursement Telephone Expense	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 115.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Wayne PAL</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2018
Mailing Address 1 PAL Drive		FEC Identification Number C
City Wayne	State NJ	Zip Code 07470
Purpose of Disbursement Ad Journal	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 350.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	580.44
<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)	PAGE 33 OF 69			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. West Orange Saint Patrick's Day Parade C</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address Committee P.O. Box 344		FEC Identification Number C
City West Orange	State NJ	Zip Code 07052
Purpose of Disbursement Ad Journal	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>BF1C98740144B48B487F</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Westy Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2018
Mailing Address 15 River Road		FEC Identification Number C
City Chatham	State NJ	Zip Code 07928
Purpose of Disbursement File Storage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 181.66
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>B5316D55099FE481494C</b> <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Westy Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018
Mailing Address 15 River Road		FEC Identification Number C
City Chatham	State NJ	Zip Code 07928
Purpose of Disbursement File Storage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 285.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>BC1BFD6EE633E4644858</b> <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	767.42
<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)		PAGE 34 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Westy Self Storage</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2018	
Mailing Address 15 River Road			FEC Identification Number C	
City Chatham	State NJ	Zip Code 07928	Amount of Each Disbursement this Period 182.33	
Purpose of Disbursement File Storage		Category/ Type 001	Transaction ID : B0354E0E03B8547CC9F9	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Westy Self Storage</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018	
Mailing Address 15 River Road			FEC Identification Number C	
City Chatham	State NJ	Zip Code 07928	Amount of Each Disbursement this Period 285.76	
Purpose of Disbursement File Storage		Category/ Type 001	Transaction ID : B7585B444BFDC45F4949	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Westy Self Storage</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2018	
Mailing Address 15 River Road			FEC Identification Number C	
City Chatham	State NJ	Zip Code 07928	Amount of Each Disbursement this Period 468.09	
Purpose of Disbursement File Storage		Category/ Type 001	Transaction ID : BCCE77B5C0918483E9EA	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	936.18
<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)		PAGE 35 OF 69	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Wiley Rein LLP</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2018	
Mailing Address 1776 K Street NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20006-2304	Amount of Each Disbursement this Period 627.50	
Purpose of Disbursement Legal Services		Category/ Type 001	Transaction ID : BB857EC22C8D04C4F9A5	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	627.50
<b>TOTAL</b> This Period (last page this line number only).....▶	190734.93

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 69	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Antaki, Alan P., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018	
Mailing Address 776 Ontario Court			FEC Identification Number C	
City Franklin Lakes	State NJ	Zip Code 07417	Amount of Each Disbursement this Period 2700.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BC0040D4F89E94FA79C1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Barer, Sol J., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address 2 Barer Lane			FEC Identification Number C	
City Mendham	State NJ	Zip Code 07945-2205	Amount of Each Disbursement this Period 2700.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B26723E61897E4119892	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Bass, Charles F., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 65 Elm Hill Road			FEC Identification Number C	
City Peterborough	State NH	Zip Code 03458	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B4B6B2392EA904C5182E	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7900.00
<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)	PAGE 37 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Binkevich, Stella, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 442 E 20th St Apt. 2D					
City New York	State NY	Zip Code 10009-8123	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Transaction ID : B2CC92E4DBB914320A87			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Bozzuto, Thomas, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 6025 Hollins Avenue					
City Baltimore	State MD	Zip Code 21210-1006	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : B8C6DB2D83A0B47AFBA9			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Bush, Natalie, Ferrise, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 903 Turkey Run Road					
City Mc Lean	State VA	Zip Code 22101-1705	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : B603300CB36ED4F1DA01			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6700.00
<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)	PAGE 38 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bush, Wesley, G., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018		
Mailing Address 903 Turkey Run Road			FEC Identification Number C		
City Mc Lean	State VA	Zip Code 22101-1705	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BD3FB6FCA0BC74AED94E		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Carey, Stephen E., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 1411 Russell Road			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22301	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BD0D632C8C0B4437FA8F		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Chambers, Raymond G., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 310 South Street, 4th Fl. P.O. Box 1975			FEC Identification Number C		
City Morristown	State NJ	Zip Code 07962-1975	Amount of Each Disbursement this Period 1050.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B926E608CE8414C38974		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6450.00
<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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Chung, Sengshiu, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018		
Mailing Address 26 Robert Street			FEC Identification Number <b>C</b>		
City Parsippany	State NJ	Zip Code 07054-2933	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : <b>BF93F9ECC7323467D83C</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Ciasulli, Robert, G., , Jr.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 4 Carriage Way			FEC Identification Number <b>C</b>		
City Kinnelon	State NJ	Zip Code 07405-3222	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : <b>B9F69207006614E6497E</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Cicirelli, Mark, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018		
Mailing Address 440 West End Avenue #6A			FEC Identification Number <b>C</b>		
City New York	State NY	Zip Code 10024-5358	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : <b>B618A085D76A14FF486B</b>		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6700.00
<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)	PAGE 40 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Cohen, Steven, M., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018		
Mailing Address 3 Trails End			FEC Identification Number C		
City Chappaqua	State NY	Zip Code 10514-1617	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B52D065064C1E44EDB5A		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Cohen, Steven, M., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2018		
Mailing Address 3 Trails End			FEC Identification Number C		
City Chappaqua	State NY	Zip Code 10514-1617	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BE811C56ED6284CCFAC3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Coors, William K., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018		
Mailing Address 21509 Cabrini Boulevard			FEC Identification Number C		
City Golden	State CO	Zip Code 80401-9406	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B0A0AB72A8F6B4323900		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7900.00
<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)	PAGE 41 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Faison, Jay, W., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 1355 Greenwood Cliffs Ste 301			FEC Identification Number C		
City Charlotte	State NC	Zip Code 28204-2981	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B37773A3DC82A49FEBD2		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Glenn, Harry J., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 1540 Gulf Blvd., #404			FEC Identification Number C		
City Clearwater Beach	State FL	Zip Code 33767	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B30BE48F282FA4625A86		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Gregory, Douglas M., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address 101 Constitution Ave., NW Suite 600 West			FEC Identification Number C		
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B3B5787FD9FB146849C0		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7900.00
<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)	PAGE 42 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kime, Carl, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018		
Mailing Address 2231 N. Quebec St					
City Arlington	State VA	Zip Code 22207-3815	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : BF0FF5806D0E14D5C915			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>B. Magerman, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address 117 Raynham Road					
City Merion Station	State PA	Zip Code 19066-1735	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : BD3C59DB74BF74BC980C			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>C. Marotta, Patrick A., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 127 Maple St					
City Summit	State NJ	Zip Code 07901-3465	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : B90643105BAAD45619B5			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7700.00
<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)	PAGE 43 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mertz, Landon, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 1 Blossom Road			FEC Identification Number C		
City Rochester	State NY	Zip Code 14610-1009	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B19B577E5FC8249C4A71		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Newman, Mark S., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 249 S. Beach Road			FEC Identification Number C		
City Hobe Sound	State FL	Zip Code 33455-2512	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BF748F63B2A744299BBA		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Perelman, Ronald, O., ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 35 E 62nd Street			FEC Identification Number C		
City New York	State NY	Zip Code 10065-8014	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B5997183478354810AAE		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6900.00
<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)	PAGE 44 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Smith, Daryl D., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address 12788 NW Mariner Court			FEC Identification Number C		
City Palm City	State FL	Zip Code 34990	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B4DFAC729420C42BD93B		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Starrett, Marian W., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 205 Mt. Kemble Avenue			FEC Identification Number C		
City Morristown	State NJ	Zip Code 07960	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B63B622A578D64BBB965		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Van Roijen, Peter P., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address P.O. Box 2030			FEC Identification Number C		
City Wilson	State WY	Zip Code 83014-2030	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B89B3AB6346B74562AB9		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4700.00
<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)	PAGE 45 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Van Scoyoc, H. Stewart, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 131 Yarnick Road					
City Great Falls	State VA	Zip Code 22066-3525	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2500.00		
Candidate Name		Transaction ID : BA3D3E4AD57C248F68C3			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>B. Wentworth, Finn, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address 53 Maple Ave					
City Morristown	State NJ	Zip Code 07960	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : BD7D8B59099454E338BC			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) <b>C. West, Ann Wick, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018		
Mailing Address 42 Old Wood Road					
City Bernardsville	State NJ	Zip Code 07924-1416	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : BB4778D91F222400E8BD			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7900.00
<b>TOTAL</b> This Period (last page this line number only).....	7900.00

**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)	PAGE 46 OF 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. White, Letitia H., , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 13901 Piscataway Drive					
City Fort Washington	State MD	Zip Code 20744-6639	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 2700.00		
Candidate Name		Transaction ID : BC4AD0DB467AC4FD5A6B			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Winslow, Matt, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 6 Elmwood Hill Lane					
City Rochester	State NY	Zip Code 14610-3446	FEC Identification Number C		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Amount of Each Disbursement this Period 1500.00		
Candidate Name		Transaction ID : BE682668AA8514C31BF9			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	74950.00

**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)	PAGE 47 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Action Committee for Rural Electrificati</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018
Mailing Address 4301 Wilson Blvd (ACRE)		FEC Identification Number C C0002972
City Arlington	State VA	Zip Code 22203-1867
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Action Committee for Rural Electrificati</b>		Amount of Each Disbursement this Period 2000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BB456EC86845A42BFB60</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Air Line Pilots Assoc Intl PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018
Mailing Address 1625 Massachusetts Avenue, N.W.		FEC Identification Number C C00035451
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Air Line Pilots Assoc Intl PAC</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BD383C50F78F84FFB93D</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Airbus Group, Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018
Mailing Address 2550 Wasser Ter Ste 9000		FEC Identification Number C C00421230
City Herndon	State VA	Zip Code 20171-6382
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Airbus Group, Inc. PAC</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B8CEA767FA04441C584B</b>
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8500.00
<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)		PAGE 48 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Optometric Association PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 1505 Prince Street Suite 300			FEC Identification Number C C00024968	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B302AF2555B494B8396D	
Candidate Name <b>American Optometric Association PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AMO Voluntary PAF</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 2 W Dixie Hwy			FEC Identification Number C C00027532	
City Dania Beach	State FL	Zip Code 33004-4312	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BA630BE32344648C7B03	
Candidate Name <b>AMO Voluntary PAF</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. BAE Systems USA PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 1101 Wilson Blvd			FEC Identification Number C C00281212	
City Arlington	State VA	Zip Code 22209-2211	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BAEF45DC678AF4D2D9B2	
Candidate Name <b>BAE Systems USA PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<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)		PAGE 49 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Barclays Group US Inc. PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 2001 K St NW FI 11			FEC Identification Number <b>C</b> C00448852	
City Washington	State DC	Zip Code 20006-1037	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B0D635FECAB684FC0877	
Candidate Name <b>Barclays Group US Inc. PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Boeing Political Action Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 929 Long Bridge Dr			FEC Identification Number <b>C</b> C00142711	
City Arlington	State VA	Zip Code 22202-4208	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B4A6F5C4D18A345208D3	
Candidate Name <b>Boeing Political Action Committee</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BRACEPAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 2000 K St NW Ste 500			FEC Identification Number <b>C</b> C00021295	
City Washington	State DC	Zip Code 20006-1809	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BE8EF14C7EE0B48DC8E4	
Candidate Name <b>BRACEPAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10500.00
<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)		PAGE 50 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a <input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Covanta Energy Corporation PAF</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 445 South St			FEC Identification Number C C00142158	
City Morristown	State NJ	Zip Code 07960-6475	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BDA4476EC205246D6829	
Candidate Name <b>Covanta Energy Corporation PAF</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. CSRA Inc. PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2018	
Mailing Address 3170 Fairview Park Dr			FEC Identification Number C C00101410	
City Falls Church	State VA	Zip Code 22042-4516	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BA0E2F2AD37384F8CA51	
Candidate Name <b>CSRA Inc. PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Day &amp; Zimmermann Inc Federal PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018	
Mailing Address 1500 Spring Garden Street			FEC Identification Number C C00341271	
City Philadelphia	State PA	Zip Code 19130-4067	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B60CC28555AE74945849	
Candidate Name <b>Day &amp; Zimmermann Inc Federal PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6500.00
<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)		PAGE 51 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Deloitte PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018
Mailing Address PO Box 365		FEC Identification Number C 00211318
City Washington	State DC	Zip Code 20044-0365
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Deloitte PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00
State: District:		Transaction ID : B6474FCDAFADD4B8FAC5 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. DRS Technologies, Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018
Mailing Address 2345 Crystal Dr Ste 1000		FEC Identification Number C 00275123
City Arlington	State VA	Zip Code 22202-4801
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>DRS Technologies, Inc. PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1000.00
State: District:		Transaction ID : B1E008D6B046D47238BE <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Employees of Northrop Grumman Corp.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018
Mailing Address 2980 Fairview Park Dr		FEC Identification Number C 00088591
City Falls Church	State VA	Zip Code 22042-4511
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Employees of Northrop Grumman Corp.</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00
State: District:		Transaction ID : B95ACA924D11A46BBB9E <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11000.00
<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)		PAGE 52 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Eureka PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018	
Mailing Address PO Box 30844			FEC Identification Number C C00390161	
City Bethesda	State MD	Zip Code 20824-0844	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B7E7645E78B04447A896	
Candidate Name Eureka PAC		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fluor Corporation PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018	
Mailing Address 403 E Capitol St SE			FEC Identification Number C C00034132	
City Washington	State DC	Zip Code 20003-3810	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BD33E3AD33F774386BB8	
Candidate Name Fluor Corporation PAC		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Friends of Bud Cramer</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018	
Mailing Address PO Box 2621			FEC Identification Number C C00239038	
City Huntsville	State AL	Zip Code 35804-2621	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BE29CE91C21FA4A53BF1	
Candidate Name Friends of Bud Cramer		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9500.00
<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)		PAGE 53 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a <input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. General Dynamics Corporation PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018
Mailing Address 2941 Fairview Park Dr		FEC Identification Number C C00078451
City Falls Church	State VA	Zip Code 22042-4522
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>General Dynamics Corporation PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 5000.00 Transaction ID : B266589DD8F7C447B9ED <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. General Electric Company PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018
Mailing Address 1299 Pennsylvania Ave NW Ste 900		FEC Identification Number C C00024869
City Washington	State DC	Zip Code 20004-2414
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>General Electric Company PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 2500.00 Transaction ID : BD177673725B84536B9B <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Graphic Packaging International INC PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 1500 Riveredge Pkwy Ste 100		FEC Identification Number C C00282566
City Atlanta	State GA	Zip Code 30328-4658
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Graphic Packaging International INC PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Amount of Each Disbursement this Period 500.00 Transaction ID : BB71062DE124A419DACE <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8000.00
<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)		PAGE 54 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Harris Corporation PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 600 Maryland Ave SW Ste 850E		FEC Identification Number C C00100321
City Washington	State DC	Zip Code 20024-2566
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Harris Corporation PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00
State: District:		Transaction ID : B32B3EDB74D9346FAACE <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Honeywell International PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 101 Constitution Ave NW		FEC Identification Number C C00096156
City Washington	State DC	Zip Code 20001-2133
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Honeywell International PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00
State: District:		Transaction ID : BB9D7E9CDEA76474F873 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. INTEL PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 1155 F Street, NW, Suite 1025		FEC Identification Number C C00125641
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>INTEL PAC</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5000.00
State: District:		Transaction ID : B16234AAF0D6469FA6C <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<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)		PAGE 55 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Investment Company Institute PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 1401 H St NW Ste 1200		FEC Identification Number C C00105981
City Washington	State DC	Zip Code 20005-2110
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Investment Company Institute PAC</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B9EE581B112A946E78E3</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Johnson &amp; Johnson PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 1 Johnson And Johnson Plz		FEC Identification Number C C00010983
City New Brunswick	State NJ	Zip Code 08933-0001
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Johnson &amp; Johnson PAC</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BB6B5EB36E5A04999A22</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Kay Granger Campaign Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 1701 River Run Ste 308		FEC Identification Number C C00310532
City Fort Worth	State TX	Zip Code 76107-6547
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Granger, Kay, , ,</b>		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B58CB67DA0D8B401683F</b>
State: TX District: 12		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8000.00
<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)		PAGE 56 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ken Calvert For Congress Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address PO Box 78376		FEC Identification Number C C00257337
City Corona	State CA	Zip Code 92877-0145
Purpose of Disbursement Refund: Refund of Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Calvert, Ken, , ,</b>	Category/ Type	Transaction ID : B019483353A864E8788C
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 42		

Full Name (Last, First, Middle Initial) <b>B. L3 Technologies, Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 600 3rd Ave		FEC Identification Number C C00338087
City New York	State NY	Zip Code 10016-1901
Purpose of Disbursement Refund: Refund of Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>L3 Technologies, Inc. PAC</b>	Category/ Type	Transaction ID : B470C6A231E1848EC815
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Leidos Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018
Mailing Address 301 Laboratory Road		FEC Identification Number C C00546234
City Oak Ridge	State TN	Zip Code 37830
Purpose of Disbursement Refund: Refund of Contribution	<input type="checkbox"/> 010	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>Leidos Inc. PAC</b>	Category/ Type	Transaction ID : B9E5B16608A944491B63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12000.00
<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)	PAGE 57 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lockheed Martin EPAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 2121 Crystal Dr Ste 100					
City Arlington	State VA	Zip Code 22202-3706	FEC Identification Number <b>C</b> C00303024		
Purpose of Disbursement Refund: Refund of Contribution		010	Amount of Each Disbursement this Period 5000.00		
Candidate Name <b>Lockheed Martin EPAC</b>		Category/ Type	Transaction ID : <b>B15EF0D0E2B694AB6BF3</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. MacAndrews &amp; Forbes Holdings, Inc. PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 900 7th Street, N.W., Suite 570					
City Washington	State DC	Zip Code 20001	FEC Identification Number <b>C</b> C00432856		
Purpose of Disbursement Refund: Refund of Contribution		010	Amount of Each Disbursement this Period 5000.00		
Candidate Name <b>MacAndrews &amp; Forbes Holdings, Inc. PAC</b>		Category/ Type	Transaction ID : <b>BDFF70474C238428B83D</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Marathon Petroleum Corporation Employees PAC (MPAC)</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 539 S Main St					
City Findlay	State OH	Zip Code 45840-3229	FEC Identification Number <b>C</b> C00496307		
Purpose of Disbursement Refund: Refund of Contribution		010	Amount of Each Disbursement this Period 2500.00		
Candidate Name <b>Marathon Petroleum Corporation Employees PAC (MPAC)</b>		Category/ Type	Transaction ID : <b>B88E9ED8E593340CAA8D</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12500.00
<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)		PAGE 58 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Motorola Solutions, Inc. PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 1455 Pennsylvania Ave NW Ste 900		FEC Identification Number C C00075341
City Washington	State DC	Zip Code 20004-1016
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>Motorola Solutions, Inc. PAC</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B19B6AFB1E9C44D0FB65</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. National Air Traffic Controllers Association PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 1325 Massachusetts Ave NW		FEC Identification Number C C00238725
City Washington	State DC	Zip Code 20005-4171
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>National Air Traffic Controllers Association PAC</b>		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : B58757FB63EEE47CC8F2</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. National Beer Wholesalers Assoc., PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 1101 King Street, Suite 600		FEC Identification Number C C00144766
City Alexandria	State VA	Zip Code 22314-2944
Purpose of Disbursement Refund: Refund of Contribution		010
Candidate Name <b>National Beer Wholesalers Assoc., PAC</b>		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID : BFF47E79E92A74672A4B</b>
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<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)		PAGE 59 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. National Multi Housing Council PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address 1775 I St NW Ste 1100			FEC Identification Number <b>C</b> C00130773	
City Washington	State DC	Zip Code 20006-2424	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B20E4FF9D9B194F17AA8	
Candidate Name <b>National Multi Housing Council PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. North American Meat Institute PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address 1150 Connecticut Ave NW Ste 1200			FEC Identification Number <b>C</b> C00024281	
City Washington	State DC	Zip Code 20036-4126	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B4907F673CF06489AAD0	
Candidate Name <b>North American Meat Institute PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Nuclear Energy Institute Fed PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address 1201 F St NW Fl 11			FEC Identification Number <b>C</b> C00239848	
City Washington	State DC	Zip Code 20004-1217	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B6AAB3A0B97414C2882C	
Candidate Name <b>Nuclear Energy Institute Fed PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<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)	PAGE 60 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Orbital ATK Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 1300 Wilson Blvd Employee Citizenship Fund		FEC Identification Number C C00250209
City Arlington	State VA	Zip Code 22209-2330
Purpose of Disbursement Refund: Refund of Contribution		010 Category/ Type
Candidate Name <b>Orbital ATK Inc.</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE596EA28ADBA4FB8A9B
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. PEGPAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 80 Park Plz Public Service Enterprise Group, I		FEC Identification Number C C00383489
City Newark	State NJ	Zip Code 07102-4109
Purpose of Disbursement Refund: Refund of Contribution		010 Category/ Type
Candidate Name <b>PEGPAC</b>		Amount of Each Disbursement this Period 4856.68
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA0C8534344994DFCA1C
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>c. Raytheon Company PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018
Mailing Address 1100 Wilson Blvd		FEC Identification Number C C00097568
City Arlington	State VA	Zip Code 22209-2249
Purpose of Disbursement Refund: Refund of Contribution		010 Category/ Type
Candidate Name <b>Raytheon Company PAC</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B4B26051EEE8449E8BA8
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14856.68
<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)	PAGE 61 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ryan For Congress, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address PO Box 1488			FEC Identification Number C C00330894		
City Janesville	State WI	Zip Code 53547-1488	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BD4C97EA5049A4752857		
Candidate Name Ryan, Paul, D., ,		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: WI	District: 01				

Full Name (Last, First, Middle Initial) <b>B. Sanofi US Services Inc. Employees PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address 55 Corporate Dr			FEC Identification Number C C00144345		
City Bridgewater	State NJ	Zip Code 08807-1265	Amount of Each Disbursement this Period 2500.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B700320CCC2AD4003854		
Candidate Name Sanofi US Services Inc. Employees PAC		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Sierra Nevada PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018		
Mailing Address PO Box 50193			FEC Identification Number C C00367995		
City Sparks	State NV	Zip Code 89435-0193	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B40DF6B61BEAF47829ED		
Candidate Name Sierra Nevada PAC		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5500.00
<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)		PAGE 62 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Textron Inc. PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address PO Box 878			FEC Identification Number C C00123612	
City Providence	State RI	Zip Code 02901-0878	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B97044F6C2C9F4F8F805	
Candidate Name Textron Inc. PAC		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Procter &amp; Gamble Company Good Government Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2018	
Mailing Address 1 Procter And Gamble Plz			FEC Identification Number C C00257329	
City Cincinnati	State OH	Zip Code 45202-3315	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BBC94281DE13047F59DA	
Candidate Name The Procter & Gamble Company Good Government Committee		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. U.S. Travel Association PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018	
Mailing Address 1100 New York Ave NW Ste 450W			FEC Identification Number C C00457754	
City Washington	State DC	Zip Code 20005-3934	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B316400FE5DEF4BF69F8	
Candidate Name U.S. Travel Association PAC		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<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)		PAGE 63 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. United Airlines, Inc. PAC (UAPAC)</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018	
Mailing Address 233 S Wacker Dr HDQGV			FEC Identification Number C C00101766	
City Chicago	State IL	Zip Code 60606-7147	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : B55D841090126434DA09	
Candidate Name <b>United Airlines, Inc. PAC (UAPAC)</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Valero PAC</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2018	
Mailing Address P.O. Box 696000			FEC Identification Number C C00109546	
City San Antonio	State TX	Zip Code 78269	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Refund: Refund of Contribution		Category/ Type 010	Transaction ID : BF479D8197B864771933	
Candidate Name <b>Valero PAC</b>		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	161856.68

**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 64 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Ann Grossi for County Clerk</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018		
Mailing Address 66 Comanche Ave			FEC Identification Number C		
City Rockaway	State NJ	Zip Code 07866-1116	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : B17F8751E92DF4A5AB8A		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Bob Auth For Assembly</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
Mailing Address 94 Hillcrest Dr			FEC Identification Number C		
City Dumont	State NJ	Zip Code 07628-2008	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement Brunch		Category/ Type 011	Transaction ID : B33A996C2BA284663B64		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Bob Hugin For Senate, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2018		
Mailing Address PO Box 8656			FEC Identification Number C		
City Somerville	State NJ	Zip Code 08876-8656	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement Contribution		Category/ Type 011	Transaction ID : B8FBDA0D06A2A4FCDB87		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3200.00
<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)	PAGE 65 OF 69
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Citizens For Cooney</b>		Date of Disbursement
Mailing Address 9 Rockledge Rd		M M / D D / Y Y Y Y 02 / 12 / 2018
City Montville	State NJ	Zip Code 07045-9736
Purpose of Disbursement Reception Sponsorship	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>BD5BFE3B433484C738AB</b>	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Election Fund Of BettyLou DeCroce</b>		Date of Disbursement
Mailing Address 113 Parsippany Rd		M M / D D / Y Y Y Y 01 / 31 / 2018
City Parsippany	State NJ	Zip Code 07054-4705
Purpose of Disbursement Winterfest Silver Sponsorship	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>B06B0934B5C1D46A4AB4</b>	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Election Fund of Doug Cabana</b>		Date of Disbursement
Mailing Address 104 Elcock Ave		M M / D D / Y Y Y Y 03 / 06 / 2018
City Boonton	State NJ	Zip Code 07005-1112
Purpose of Disbursement Silver Sponsorship of Reception	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>B1C2A50D05D094041987</b>	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1750.00
<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)  
17 18 19a 19b  
20a 20b 20c 21  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

**A. Election Fund Of Loretta Gragnani**

Full Name (Last, First, Middle Initial)  
Mailing Address 11 Rhoda Ter

City Parsippany State NJ Zip Code 07054-2116

Purpose of Disbursement Brunch  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 300.00

Transaction ID : B54F51FB85EA04C35B0D

Memo Item

**B. Friends Of Senator Cardinale**

Full Name (Last, First, Middle Initial)  
Mailing Address 59 Hazel St

City Dumont State NJ Zip Code 07628-1216

Purpose of Disbursement Brunch  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : BD1E5E09F5426480CA0D

Memo Item

**c. Hopatcong Republican Club**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 94

City Hopatcong State NJ Zip Code 07843-0094

Purpose of Disbursement Valentine Brunch  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2018

FEC Identification Number: C

Amount of Each Disbursement this Period: 250.00

Transaction ID : B89A1F2DA3E5E4711B8B

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 800.00

**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 67 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Jim Gannon For Sheriff</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
Mailing Address PO Box 7			FEC Identification Number C		
City Succasunna	State NJ	Zip Code 07876-0007	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Emerald Sponsorship		Category/ Type 011	Transaction ID : BE4A9F26F9D23443EBB3		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Nutley Irish American Assoc., Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2018		
Mailing Address 209 Walnut Street			FEC Identification Number C		
City Nutley	State NJ	Zip Code 07110	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement Dinner Dance		Category/ Type 012	Transaction ID : B572B238497A841CAA2C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Parsippany Republican Club</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2018		
Mailing Address 3 F X Downey Court			FEC Identification Number C		
City Parsippany	State NJ	Zip Code 07054-2338	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement Beefsteak Dinner		Category/ Type 011	Transaction ID : B811392F3D65C42249AD		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	900.00
<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)	PAGE 68 OF 69
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Republican Club of the Boonton's</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018
Mailing Address 703 Cornelia St Doris Yanez, Treasurer		FEC Identification Number C
City Boonton	State NJ	Zip Code 07005-1617
Purpose of Disbursement Gold Sponsor-Spring Fundraiser	Category/Type 011	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B4F7F01EE3CAA452A88D	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Sussex County Republican Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018
Mailing Address PO Box 425		FEC Identification Number C
City Newton	State NJ	Zip Code 07860-0425
Purpose of Disbursement Lincoln Day Gold Sponsor	Category/Type 011	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BC03E4ABAE9504C2098A	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Totowa Republican Organization</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2018
Mailing Address 138 Gordon Ave		FEC Identification Number C
City Totowa	State NJ	Zip Code 07512-2107
Purpose of Disbursement Cocktail Reception	Category/Type 011	
Candidate Name	Amount of Each Disbursement this Period 500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BD772C0DD4433440EA6D	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<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)	PAGE 69 OF 69			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**FRELINGHUYSEN FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Totowa Republican Organization</b>		Date of Disbursement
Mailing Address 138 Gordon Ave		M M / D D / Y Y Y Y 02 / 14 / 2018
City Totowa	State NJ	Zip Code 07512-2107
Purpose of Disbursement Dinner	Category/ Type 011	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BFF40D067DA5D4098BF5 <input type="checkbox"/> Memo Item	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9150.00