

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 NORPAC

ADDRESS (number and street) PO Box 1543 Englewood Cliffs NJ 07632 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00247403 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 08 01 2014 through 08 31 2014

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 Mr Josef Schranz

Signature of Treasurer Mr Josef Schranz [Electronically Filed] Date 09 16 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NORPAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="271759.30"/>	<input type="text" value="271759.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="256227.24"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="30693.30"/>	<input type="text" value="579155.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="286920.54"/>	<input type="text" value="850914.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25845.55"/>	<input type="text" value="589839.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="261074.99"/>	<input type="text" value="261074.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

NORPAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30673.00	579016.10
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	30673.00	579016.10
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	30673.00	579016.10
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	20.30	139.40
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	30693.30	579155.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	30693.30	579155.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10197.55	217103.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10197.55	217103.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15648.00	367240.65
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	4896.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	4896.00
29. Other Disbursements	0.00	600.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25845.55	589839.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25845.55	589839.81

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30673.00	579016.10
34. Total Contribution Refunds (from Line 28(d))	0.00	4896.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30673.00	574120.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10197.55	217103.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10197.55	217103.16

: 97 `A -G7 9 @C B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: F3XN
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address 112 Bon Air Avenue

City New Rochelle State NY Zip Code 10804

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

Name of Employer NA Occupation Student

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt
08 / 12 / 2014
Transaction ID : SA11AI.38600

Amount of Each Receipt this Period
10.00

Donation

B. Lewis Attas
Full Name (Last, First, Middle Initial)

Mailing Address 232 Hardenburgh Ave

City Demarest State NJ Zip Code 07627

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

Name of Employer Self Occupation MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
180.00

Date of Receipt
08 / 12 / 2014
Transaction ID : SA11AI.38608

Amount of Each Receipt this Period
180.00

Earmark - Sherman

C. Ann Baron
Full Name (Last, First, Middle Initial)

Mailing Address 79 John Place

City Bergenfield State NJ Zip Code 07621

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

Name of Employer Homemaker Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 19 / 2014
Transaction ID : SA11AI.38641

Amount of Each Receipt this Period
5000.00

Donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 5190.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Yale Baron
Full Name (Last, First, Middle Initial)
Mailing Address 79 John Place
City Bergenfield State NJ Zip Code 07621
FEC ID number of contributing federal political committee. **C**
Name of Employer President Occupation Bais Medrash of Bergenfield
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 08 / 19 / 2014
Transaction ID : SA11AI.38642
Amount of Each Receipt this Period 5000.00
Donation

B. David Bercow
Full Name (Last, First, Middle Initial)
Mailing Address 1601 3rd Avenue, Apt 27G
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer International Shops Occupation Sales
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 08 / 02 / 2014
Transaction ID : SA11AI.38659
Amount of Each Receipt this Period 250.00
Donation

C. Bruce Bukiet
Full Name (Last, First, Middle Initial)
Mailing Address 45 Woodland Ave.
City West Orange State NJ Zip Code 07052
FEC ID number of contributing federal political committee. **C**
Name of Employer NJIT Occupation professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 08 / 21 / 2014
Transaction ID : SA11AI.38647
Amount of Each Receipt this Period 500.00
Earmark - McMorris Rodgers

SUBTOTAL of Receipts This Page (optional)..... 5750.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. Bruce Bukiet		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : SA11AI.38648
Mailing Address 45 Woodland Ave.		Amount of Each Receipt this Period 500.00
City West Orange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. C	Earmark - McCaul	
Name of Employer NJIT	Occupation professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Bruce Bukiet		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 Transaction ID : SA11AI.38649
Mailing Address 45 Woodland Ave.		Amount of Each Receipt this Period 1000.00
City West Orange	State NJ	Zip Code 07052
FEC ID number of contributing federal political committee. C	Donation	
Name of Employer NJIT	Occupation professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ben Chouake		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 Transaction ID : SA11AI.38653
Mailing Address 245 Hutchinson Rd.		Amount of Each Receipt this Period 500.00
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C	Earmark - Kwasman	
Name of Employer Self	Occupation MD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12245.00	

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

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

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

FOR LINE NUMBER: PAGE 10 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

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

Mailing Address P.O. Box 1057

City Alpine State NJ Zip Code 07620

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

Name of Employer Occupation
CPI Englewood President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38618

Amount of Each Receipt this Period
500.00

Earmark - Sherman

Full Name (Last, First, Middle Initial)
B. amy cushmaro

Mailing Address 13 church ct

City closter State NJ Zip Code 07624

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

Name of Employer Occupation
n/a n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38609

Amount of Each Receipt this Period
250.00

Earmark - Sherman

Full Name (Last, First, Middle Initial)
C. Roni Dersovitz

Mailing Address 95 Buckingham Rd

City Tenafly State NJ Zip Code 07670

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

Name of Employer Occupation
RD Legal Funding CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38616

Amount of Each Receipt this Period
500.00

Earmark - Sherman

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. Bruce Egert		Date of Receipt MM / DD / YYYY 08 / 12 / 2014 Transaction ID : SA11AI.38605
Mailing Address 9 Kansas St		Amount of Each Receipt this Period 100.00
City Hackensack	State NJ	Zip Code 07601
FEC ID number of contributing federal political committee. C		Earmark - Sherman
Name of Employer Self	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Kenneth Fried		Date of Receipt MM / DD / YYYY 08 / 12 / 2014 Transaction ID : SA11AI.38612
Mailing Address 21 Irene Ct.		Amount of Each Receipt this Period 300.00
City Demarest	State NJ	Zip Code 07627
FEC ID number of contributing federal political committee. C		Earmark - Sherman
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Allen Friedman		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 Transaction ID : SA11AI.38652
Mailing Address 315 Johnson Avenue		Amount of Each Receipt this Period 1000.00
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C		Earmark - Sherman
Name of Employer J.P. Morgan Chase	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8700.00	

SUBTOTAL of Receipts This Page (optional).....▶	1400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Leonard Ganz
Full Name (Last, First, Middle Initial)
Mailing Address 16 Country Club Way
City Demarest State NJ Zip Code 07627
FEC ID number of contributing federal political committee. **C**
Name of Employer Print Audit Bureau Inc. Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA11AI.38611
Amount of Each Receipt this Period 250.00
Earmark - Sherman

B. David Garfunkel
Full Name (Last, First, Middle Initial)
Mailing Address 3 Wendy Lane
City Closter State NJ Zip Code 07624
FEC ID number of contributing federal political committee. **C**
Name of Employer Northern Valley Anesthesiology Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA11AI.38623
Amount of Each Receipt this Period 500.00
Earmark - Sherman

C. Rebecca Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 830 Downing St
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Yavneh Academy of Paramus, NJ Occupation School Secretary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA11AI.38601
Amount of Each Receipt this Period 100.00
Earmark - Sherman

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

A. Jack Hendler
Full Name (Last, First, Middle Initial)

Mailing Address 1410 Broadway

City New York State NY Zip Code 10018

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

Name of Employer Net Worth Solutions Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 13 / 2014
Transaction ID : SA11AI.38635

Amount of Each Receipt this Period
1000.00

Earmark - Sherman

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

Mailing Address 102 Huguenot Ave.

City Englewood State NJ Zip Code 07631

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

Name of Employer self Occupation trader

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt
08 / 04 / 2014
Transaction ID : SA11AI.38597

Amount of Each Receipt this Period
500.00

Earmark - Meadows

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

Mailing Address 124 Oxford Drive

City Tenafly State NJ Zip Code 07670

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

Name of Employer Pfizer Occupation Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 12 / 2014
Transaction ID : SA11AI.38622

Amount of Each Receipt this Period
500.00

Earmark - Sherman

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

A. Howard Lavin
Full Name (Last, First, Middle Initial)

Mailing Address 12 Howard Park Drive

City Tenafly State NJ Zip Code 07670

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

Name of Employer Stroock & Stroock & Lavin LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.38645

Amount of Each Receipt this Period
 250.00

Earmark - Sherman

B. William Levin
Full Name (Last, First, Middle Initial)

Mailing Address 970 Hope St #2E

City Stamford State CT Zip Code 06907

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

Name of Employer City of Stamford CT Occupation Planning Board

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.38603

Amount of Each Receipt this Period
 100.00

Earmark - Sherman

C. Allen Levinson
Full Name (Last, First, Middle Initial)

Mailing Address 11 Ivy Place

City Upper Saddle River State NJ Zip Code 07458

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

Name of Employer Credit Risk Advisors LP Occupation Investment Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11AI.38631

Amount of Each Receipt this Period
 100.00

Earmark - Sherman

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
NORPAC

A. Richard Lieblich
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 177
 City Alpine State NJ Zip Code 07620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation MD
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38614
 Amount of Each Receipt this Period
 200.00
 Earmark - Sherman
 Aggregate Year-to-Date ▼
 200.00

B. Eric London
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 Easton Ave
 City Somerset State NJ Zip Code 08873
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation MD
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38633
 Amount of Each Receipt this Period
 50.00
 Earmark - Sherman
 Aggregate Year-to-Date ▼
 50.00

C. Joseph Mark
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 Norma Road
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hambro America Inc. Occupation Investment Banker
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014
Transaction ID : SA11AI.38650
 Amount of Each Receipt this Period
 1000.00
 Earmark - Sherman
 Aggregate Year-to-Date ▼
 4000.00

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Ronni Meltzer

Mailing Address 7 King Place

City Closter State NJ Zip Code 07624

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

Name of Employer na Occupation na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **118.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SA11AI.38638

Amount of Each Receipt this Period
118.00

Earmark - Sherman

Full Name (Last, First, Middle Initial)
B. Samuel Moed

Mailing Address 54 Dana Place

City Englewood State NJ Zip Code 07631

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

Name of Employer Bristol Myers Squibb Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11AI.38643

Amount of Each Receipt this Period
1000.00

General Donation

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

Mailing Address 181 East Linden Ave

City Englewood State NJ Zip Code 07631

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

Name of Employer Rockview Management Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11AI.38660

Amount of Each Receipt this Period
1000.00

Donation

SUBTOTAL of Receipts This Page (optional).....▶	2118.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Careena Parker

Mailing Address 159 Maple St

City Englewood State NJ Zip Code 07631

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

Name of Employer Homemaker Occupation Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38599

Amount of Each Receipt this Period
500.00

Earmark - Meadows

Full Name (Last, First, Middle Initial)
B. Bruce Pomerantz

Mailing Address 96 Whitney Rd

City Short Hills State NJ Zip Code 07078

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

Name of Employer Wells Fargo Occupation Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38625

Amount of Each Receipt this Period
200.00

Earmark - Sherman

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

Mailing Address 500 West End Ave
Apt 3A

City New York State NY Zip Code 10024

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

Name of Employer D.E. Shaw Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38606

Amount of Each Receipt this Period
500.00

Earmark - Sherman

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. Hannah Rothstein		Date of Receipt MM / DD / YYYY 08 / 13 / 2014 Transaction ID : SA11AI.38636
Mailing Address 1421 Hudson St.		Amount of Each Receipt this Period 100.00
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C	Earmark - Sherman	
Name of Employer Baruch College	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) B. David Schlusel		Date of Receipt MM / DD / YYYY 08 / 20 / 2014 Transaction ID : SA11AI.38651
Mailing Address 153 Fort Lee Road		Amount of Each Receipt this Period 1000.00
City Teaneck	State NJ	Zip Code 07666
FEC ID number of contributing federal political committee. C	Earmark - Sherman	
Name of Employer Key Properties	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3625.00	

Full Name (Last, First, Middle Initial) C. Herbert Seif		Date of Receipt MM / DD / YYYY 08 / 11 / 2014 Transaction ID : SA11AI.38598
Mailing Address 251 East Linden Avenue		Amount of Each Receipt this Period 1000.00
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C	Earmark - Meadows	
Name of Employer Epic Asset Mgmt	Occupation Fund Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Helayne Simon

Mailing Address 15 Delaney Pl

City Tenafly State NJ Zip Code 07670

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

Name of Employer Occupation
na na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2014
Transaction ID : SA11AI.38629

Amount of Each Receipt this Period
100.00

Earmark - Sherman

Full Name (Last, First, Middle Initial)
B. Arthur Sinensky

Mailing Address 20 Country Club Way

City Demarest State NJ Zip Code 07627

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

Name of Employer Occupation
Alumni Capital Network Founder and Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : SA11AI.38654

Amount of Each Receipt this Period
1500.00

Earmark - Sherman

Full Name (Last, First, Middle Initial)
C. Lloyd Sokoloff

Mailing Address 32 Lincoln St

City Demarest State NJ Zip Code 07627

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

Name of Employer Occupation
Self Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2014
Transaction ID : SA11AI.38702

Amount of Each Receipt this Period
1500.00

Conduit - Sherman

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 1600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

A. Aaron A. Stein
Full Name (Last, First, Middle Initial)

Mailing Address 497 Cumberland Street

City Englewood State NJ Zip Code 07631

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2014
Transaction ID : SA11AI.38640

Amount of Each Receipt this Period
 250.00

Earmark - Meadows

B. Ari Steinfeld
Full Name (Last, First, Middle Initial)

Mailing Address 2209 Knapp St Apt 2f

City Brooklyn State NY Zip Code 11229

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

Name of Employer NY Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2014
Transaction ID : SA11AI.38596

Amount of Each Receipt this Period
 15.00

Donation

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

Mailing Address 22 Maltbie Ave.

City Ridgewood State NJ Zip Code 07450

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

Name of Employer Seward & Kissel LLP Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014
Transaction ID : SA11AI.38662

Amount of Each Receipt this Period
 500.00

Donation

SUBTOTAL of Receipts This Page (optional)..... ▶ 765.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
NORPAC

A. Hershel Wein
Full Name (Last, First, Middle Initial)
Mailing Address 1 harborview west
City Lawrence State NY Zip Code 11559
FEC ID number of contributing federal political committee. **C**
Name of Employer kpmg Occupation attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 01 / 2014
Transaction ID : SA11AI.38658
Amount of Each Receipt this Period 1000.00
Donation

B. Steven Wils
Full Name (Last, First, Middle Initial)
Mailing Address 182 Duane St 5th Fl
City New York State NY Zip Code 10013
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA11AI.38620
Amount of Each Receipt this Period 500.00
Earmark - Sherman

C. Stephen Wologin
Full Name (Last, First, Middle Initial)
Mailing Address 75 Woodland Park Drive
City Tenafly State NJ Zip Code 07670
FEC ID number of contributing federal political committee. **C**
Name of Employer US Real Estate Advisors, Inc. Occupation Real Estate Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA11AI.38627
Amount of Each Receipt this Period 1000.00
Earmark - Sherman

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Neal Yaros

Mailing Address 910 Prince St.

City State Zip Code
Teaneck NJ 07666

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

Name of Employer Occupation
Reckitt berkiser Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014
Transaction ID : SA11AI.38661

Amount of Each Receipt this Period
250.00

Donation

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	30673.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 39
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
139.40

Date of Receipt
08 / 31 / 2014
Transaction ID : SA17.38664

Amount of Each Receipt this Period
20.30

interest income

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	20.30
TOTAL This Period (last page this line number only).....▶	20.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)
A. Mindy Berman

Mailing Address 312 Cedar Ave

City Highland Park State NJ Zip Code 08904

Purpose of Disbursement payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.38675

Amount of Each Disbursement this Period
1061.33

Category/Type: 001

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

Mailing Address 80 South River Street

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement Business Membership

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 14 / 2014

Transaction ID : SB21B.38683

Amount of Each Disbursement this Period
117.70

Category/Type:

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

Mailing Address Two Concourse Parkway, Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Elavon merchant service fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 31 / 2014

Transaction ID : SB21B.38672

Amount of Each Disbursement this Period
178.95

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1357.98

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

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

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2014

Mailing Address 1 Geico Plaza

City: Bethesda State: MD Zip Code: 20810

Purpose of Disbursement: Josef Schranz Car Insurance

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.38674**

Amount of Each Disbursement this Period: 134.00

Category/Type: 001

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

Date of Disbursement: MM / DD / YYYY
08 / 11 / 2014

Mailing Address 1 Geico Plaza

City: Bethesda State: MD Zip Code: 20810

Purpose of Disbursement: Josef Schranz Car Insurance

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.38679**

Amount of Each Disbursement this Period: 134.00

Category/Type: 001

Full Name (Last, First, Middle Initial)
C. Evan Gorin

Date of Disbursement: MM / DD / YYYY
08 / 11 / 2014

Mailing Address 597 Empire Blvd. Apt #3

City: Brooklyn State: NY Zip Code: 11213

Purpose of Disbursement: Web Development - Mission Control

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID : **SB21B.38678**

Amount of Each Disbursement this Period: 587.00

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... ▶ 855.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Horizon Blue Cross Blue Shield of New Jersey

Mailing Address 3 Penn Plaza East

City Newark State NJ Zip Code 07105

Purpose of Disbursement
Josef Schranz Health Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB21B.38681

Amount of Each Disbursement this Period

718.32

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Transaction ID : SB21B.38673

Amount of Each Disbursement this Period

591.55

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 1551 S. Washington Ave.

City Piscataway State NJ Zip Code 08854

Purpose of Disbursement
invoice

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2014

Transaction ID : SB21B.38677

Amount of Each Disbursement this Period

151.45

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

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

1461.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Paychex

Mailing Address 1551 S. Washington Ave.

City State Zip Code
Piscataway NJ 08854

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2014

Transaction ID : SB21B.38685

Amount of Each Disbursement this Period

494.44

Category/
Type

Full Name (Last, First, Middle Initial)

B. Paychex

Mailing Address 1551 S. Washington Ave.

City State Zip Code
Piscataway NJ 08854

Purpose of Disbursement
taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Transaction ID : SB21B.38701

Amount of Each Disbursement this Period

492.85

Category/
Type

Full Name (Last, First, Middle Initial)

C. paypal

Mailing Address PO Box 45950

City State Zip Code
Omaha NE 68145

Purpose of Disbursement
fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2014

Transaction ID : SB21B.38663

Amount of Each Disbursement this Period

88.50

Category/
Type

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

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

1075.79

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. Mr Josef Schranz		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 3 Buena Vista Road		Transaction ID : SB21B.38686
City Suffern	State NY	
Purpose of Disbursement payroll	Candidate Name	Amount of Each Disbursement this Period 1492.06
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Mr Josef Schranz		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 3 Buena Vista Road		Transaction ID : SB21B.38687
City Suffern	State NY	
Purpose of Disbursement payroll	Candidate Name	Amount of Each Disbursement this Period 1542.57
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Mr Josef Schranz		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 3 Buena Vista Road		Transaction ID : SB21B.38697
City Suffern	State NY	
Purpose of Disbursement payroll	Candidate Name	Amount of Each Disbursement this Period 1454.13
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	4488.76
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Square, Inc

Mailing Address 110 5th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
fee

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2014

Transaction ID : SB21B.38671

Amount of Each Disbursement this Period

178.95

Full Name (Last, First, Middle Initial)

B. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
Credit Card

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2014

Transaction ID : SB21B.38684

Amount of Each Disbursement this Period

527.27

Full Name (Last, First, Middle Initial)

C. Valley National Bank

Mailing Address 1445 Valley Rd

City Wayne State NJ Zip Code 07470

Purpose of Disbursement
checks & forms

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 18 / 2014

Transaction ID : SB21B.38689

Amount of Each Disbursement this Period

114.81

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

821.03

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+19A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.38684**

Exxon \$33.08 EZ Pass \$45.00 Exxon \$45.54 Constant Contact \$80.00 USPS \$19.99 Walgreens \$6.91 Getty \$34.00
Citgo Food Mart \$19.40 Racetrac 587 \$20.01 Citgo \$20.00 Citgo \$19.23

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. Valley National Bank

Mailing Address 1445 Valley Rd

City State Zip Code
Wayne NJ 07470

Purpose of Disbursement
Deposited Item Reversal Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2014

Transaction ID : SB21B.38690

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Verizon wireless

Mailing Address PO Box 17120

City State Zip Code
Tucson AZ 85731

Purpose of Disbursement
cell phone

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2014

Transaction ID : SB21B.38696

Amount of Each Disbursement this Period

117.67

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

137.67

10197.55

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. CATHY MCMORRIS RODGERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 21 / 2014
Mailing Address BOX 137		Transaction ID : SB23.38700
City SPOKANE	State WA	
Purpose of Disbursement earmark - Bruce Bukiet		Amount of Each Disbursement this Period 500.00
Candidate Name CATHY MCMORRIS RODGERS FOR CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 05	

Full Name (Last, First, Middle Initial) B. KWASMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address PO BOX 68739		Transaction ID : SB23.38691
City ORO VALLEY	State AZ	
Purpose of Disbursement Earmarked Contributions to Kwasman		Amount of Each Disbursement this Period 500.00
Candidate Name KWASMAN FOR CONGRESS		Category/ Type
Office Sought: <input checked="" 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: AZ	District:	

Full Name (Last, First, Middle Initial) C. MCCAUL FOR CONGRESS, INC		Date of Disbursement MM / DD / YYYY 08 / 21 / 2014
Mailing Address 815-A Brazos Street PMB 230		Transaction ID : SB23.38699
City Austin	State TX	
Purpose of Disbursement earmark - Bruce Bukiet		Amount of Each Disbursement this Period 500.00
Candidate Name MCCAUL FOR CONGRESS, INC		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 10	

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

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

Form/Schedule: SB23

Transaction ID : SB23.38700

earmark - Bruce Bukiet

Form/Schedule: SB23

Transaction ID: SB23.38691

Contributors to Kwasman: Chouake Ben \$500

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.38699

earmark - Bruce Bukiet

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial) A. MEADOWS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address PO BOX 811		Transaction ID : SB23.38676
City HENDERSONVILLE	State NC	
Purpose of Disbursement Earmarked Contributions to Meadows		Amount of Each Disbursement this Period 500.00
Candidate Name MEADOWS FOR CONGRESS		Category/ Type
Office Sought: <input checked="" 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: NC	District: 11	

Full Name (Last, First, Middle Initial) B. MEADOWS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address PO BOX 811		Transaction ID : SB23.38680
City HENDERSONVILLE	State NC	
Purpose of Disbursement Earmarked Contributions to Meadows		Amount of Each Disbursement this Period 1000.00
Candidate Name MEADOWS FOR CONGRESS		Category/ Type
Office Sought: <input checked="" 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: NC	District: 11	

Full Name (Last, First, Middle Initial) C. MEADOWS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address PO BOX 811		Transaction ID : SB23.38682
City HENDERSONVILLE	State NC	
Purpose of Disbursement Earmarked Contributions to Meadows		Amount of Each Disbursement this Period 500.00
Candidate Name MEADOWS FOR CONGRESS		Category/ Type
Office Sought: <input checked="" 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: NC	District: 11	

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

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

2000.00

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

Form/Schedule: SB23

Transaction ID : SB23.38676

Contributors to Meadows: Herschmann Scott \$500

Form/Schedule: SB23

Transaction ID: SB23.38680

Contributors to Meadows: Seif Herbert \$1000

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

Form/Schedule: SB23

Transaction ID : SB23.38682

Contributors to Meadows: Parker Careena \$500

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NORPAC

Full Name (Last, First, Middle Initial)

A. MEADOWS FOR CONGRESS

Mailing Address PO BOX 811

City HENDERSONVILLE State NC Zip Code 28793

Purpose of Disbursement
Earmarked Contributions to Meadows

Candidate Name
MEADOWS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: NC District: 11

Date of Disbursement

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

Transaction ID : **SB23.38693**

Amount of Each Disbursement this Period

2	5	0	.	0	0
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Full Name (Last, First, Middle Initial)

B. SHERMAN FOR CONGRESS

Mailing Address 555 SOUTH FLOWER STREET SUITE 4510

City LOS ANGELES State CA Zip Code 90071

Purpose of Disbursement
Earmarked Contributions to Sherman

Candidate Name
SHERMAN FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 24

Date of Disbursement

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

Transaction ID : **SB23.38698**

Amount of Each Disbursement this Period

1	1	8	9	8	.	0	0
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. SHERMAN FOR CONGRESS

Mailing Address 555 SOUTH FLOWER STREET SUITE 4510

City LOS ANGELES State CA Zip Code 90071

Purpose of Disbursement
Lloyd Sokoloff Conduit to Sherman

Candidate Name
SHERMAN FOR CONGRESS

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: CA District: 24

Date of Disbursement

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

Transaction ID : **SB23.38704**

Amount of Each Disbursement this Period

1	5	0	.	0	0
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[MEMO ITEM]

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

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

1	2	1	4	8	.	0	0
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1	5	6	4	8	.	0	0
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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.38693

Contributors to Meadows: Stein Aaron \$250

Form/Schedule: SB23

Transaction ID: SB23.38698

Contributors to Sherman: AtlasLewis\$180.00 CookRobert\$500.00 CushmaroAmy\$250.00 DersovitzRoni\$500.00 EgertBruce\$100.00 FriedKenneth\$300.00 FriedmanAllen\$1,000.00 GanzLeonard\$250.00 GarfunkelDavid\$500.00 GordonRebecca\$100.00 HendlerJack\$1,000.00 HornMark\$500.00 LavinHoward\$250.00 LevinWilliam\$100.00 LevinsonAllen\$100.00 LieblichRichard\$200.00 LondonEric\$50.00 MarkJoe\$1,000.00 MeltzerRonni\$118.00 PomerantzBruce\$200.00 PosnerDaniel\$500.00 RothsteinHannah\$100.00 SchlussekDavid\$1,000.00 SinenskyArthur\$1,500.00 SimonHelayne\$100.00 WilsSteven\$500.00 WologinStephen\$1,000.00