

**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

ALEXANDER_2026

ADDRESS (number and street)

2 CLIPPER COURT

Check if different
than previously
reported. (ACC)

GALLOWAY

NJ

08205

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00913368

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NJ

02

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

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2025

through

M M / D D / Y Y Y Y

09 / 30 / 2025

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

Type or Print Name of Treasurer Alexander, Anna, , ,

Signature of Treasurer

Alexander, Anna, , ,

Date

M M / D D / Y Y Y Y

10 / 15 / 2025

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

ALEXANDER_2026

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2025

To:

M M / D D / Y Y Y Y
09 30 2025

	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))	10516.67	10516.67
(b) Total Contribution Refunds (from Line 20(d))	3300.00	3300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	7216.67	7216.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11788.81	11788.81
(b) Total Offsets to Operating Expenditures (from Line 14)	4043.00	4043.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7745.81	7745.81
8. Cash on Hand at Close of Reporting Period (from Line 27)	1470.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2000.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ALEXANDER_2026

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

8591.67

8591.67

(ii) Unitemized.....

1925.00

1925.00

(iii) TOTAL of contributions
from individuals ▶

10516.67

10516.67

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

10516.67

10516.67

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

2000.00

2000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

2000.00

2000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

4043.00

4043.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.09

0.09

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

16559.76

16559.76

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

11788.81

11788.81

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

3300.00

3300.00

(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 20(a), (b), and (c)).....

3300.00

3300.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

15088.81

15088.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

0.00

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

16559.76

25. SUBTOTAL (add Line 23 and Line 24).....

16559.76

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

15088.81

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

1470.95

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 24

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	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)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Alexander, Anna, , ,

A. Mailing Address PO Box 818

City

Oceanville

State

NJ

Zip Code

08205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

303.67

Date of Receipt

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

Transaction ID : SA11AI.4425

Amount of Each Receipt this Period

181.67

☐ Memo Item

In-kind - Office supplies

Full Name (Last, First, Middle Initial)

Alexander, Anna, , ,

B. Mailing Address PO Box 818

City

Oceanville

State

NJ

Zip Code

08205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

313.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	2	5

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Act Blue

C. Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6805.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	2	5

Transaction ID : SA11AI.4278.0

Amount of Each Receipt this Period

10.00

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

191.67

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 24

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Baker, Theresa, , ,

A.

Mailing Address 414 Shell Lane

City

Egg Harbor Twp

State

NJ

Zip Code

08234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 20 2025

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Act Blue

B.

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4087.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 20 2025

Transaction ID : SA11AI.4171.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Edelstein, Claire, , ,

C.

Mailing Address 38 Whitewater Drive

City

Barnegat

State

NJ

Zip Code

08005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2025

Transaction ID : SA11AI.4124

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)
Act Blue

A. Mailing Address PO Box 962017

City
Boston

State
MA

Zip Code
02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2025

Transaction ID : SA11AI.4124.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)
Edelstein, Claire, , ,

B. Mailing Address 38 Whitewater Drive

City
Barnegat

State
NJ

Zip Code
08005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 14 2025

Transaction ID : SA11AI.4167

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
Act Blue

C. Mailing Address PO Box 962017

City
Boston

State
MA

Zip Code
02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3837.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 14 2025

Transaction ID : SA11AI.4167.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

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

500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Edelstein, Claire, , ,

A.

Mailing Address 38 Whitewater Drive

City

Barnegat

State

NJ

Zip Code

08005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2025

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 01 2025

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Act Blue

B.

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 01 2025

Transaction ID : SA11AI.4247.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Giegerich, Thomas, , ,

C.

Mailing Address 420 North Vendome Avenue

City

Margate City

State

NJ

Zip Code

08402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Orthodontist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

2050.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Hitchner, Nancy, , ,

A. Mailing Address 217 N. Iroquois Avenue

City

Margate City

State

NJ

Zip Code

08402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 05 2025

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Act Blue

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3235.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 05 2025

Transaction ID : SA11AI.4155.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

Hitchner, Nancy, , ,

Mailing Address 217 N. Iroquois Avenue

City

Margate City

State

NJ

Zip Code

08402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : SA11AI.4267

Amount of Each Receipt this Period

50.00

☐ Memo Item

1050.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)
Act Blue

A. Mailing Address PO Box 962017

City
Boston

State
MA

Zip Code
02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6395.00

Date of Receipt

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

Transaction ID : SA11AI.4267.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)
Kennedy, Patricia, , ,

B. Mailing Address 136 Bayville Way

City
Waretown

State
NJ

Zip Code
08758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2025

Transaction ID : SA11AI.4145

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)
Act Blue

C. Mailing Address PO Box 962017

City
Boston

State
MA

Zip Code
02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 05 2025

Transaction ID : SA11AI.4145.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

250.00

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

PAGE 11 OF 24

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

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Kennedy, Patricia, , ,

A.

Mailing Address 136 Bayville Way

City

Waretown

State

NJ

Zip Code

08758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4270

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Act Blue

B.

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6645.00

Date of Receipt

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

Transaction ID : SA11AI.4270.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Mendelsohn, Celia, , ,

C.

Mailing Address 28 Masters Court

City

Little Egg Harbor

State

NJ

Zip Code

08087

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	2	5

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1250.00

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

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

PAGE 12 OF 24

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

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Act Blue

A.

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	5	

Transaction ID : SA11AI.4182.0

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Minor, Frank, , ,

Mailing Address 210 Abbey Lane

City

Swedesboro

State

NJ

Zip Code

08085

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Logan Township

Mayor

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Act Blue

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1555.00

Date of Receipt

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

Transaction ID : SA11AI.4129.0

Amount of Each Receipt this Period

1000.00



Memo Item

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

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

1000.00

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

PAGE 13 OF 24

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Slomine, Mary, , ,

A.

Mailing Address 9 Exeter Court

City

Margate City

State

NJ

Zip Code

08402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4412

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Spence, Asheligh, , ,

Mailing Address 3029 Hartright Bend

City

Duluth

State

GA

Zip Code

30096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Firstkey Homes

Occupation

Enterprise Program Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.4132

Amount of Each Receipt this Period

300.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Act Blue

Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1855.00

Date of Receipt

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

Transaction ID : SA11AI.4132.0

Amount of Each Receipt this Period

300.00

☒ Memo Item

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

1300.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

Trotter, Pat A, , ,

A. Mailing Address 1401 Atlantic Avenue

City

Long Beach

State

NJ

Zip Code

08008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 03 2025

Transaction ID : SA11AI.4257

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Act Blue

B. Mailing Address PO Box 962017

City

Boston

State

MA

Zip Code

02196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 03 2025

Transaction ID : SA11AI.4257.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

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) ▼

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

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

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

250.00

8591.67

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

PAGE 15 OF 24

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☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

ALEXANDER, TIMOTHY C, , ,

A.

Mailing Address PO Box 818

City

Oceanville

State

NJ

Zip Code

08205

FEC ID number of contributing
federal political committee.

C H6NJ02244

Name of Employer
PRB Attorney's at LawOccupation
Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
08	/	13	/	2025

Transaction ID : SA13A.4424

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

2000.00

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

2000.00

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 16 OF 24

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

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)
NGP VAN

A. Mailing Address 1445 New York Avenue
Suite 200

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3965.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 11 2025

Transaction ID : SA14.4441

Amount of Each Receipt this Period

3965.00

☐ Memo Item
Refund of Accounting Error

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) ▼

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

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) ▼

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

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

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

3965.00

3965.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

PAGE 17 OF 24

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. Alexander, Anna, , ,

Mailing Address PO Box 818

Date of Disbursement

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

City
OceanvilleState
NJZip Code
08205

FEC Identification Number

C

Purpose of Disbursement
In-kind - Office supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

181.67

Transaction ID : SB17.4426

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. C My Kolor Graphics

Mailing Address 671 Upper Neck Road

Date of Disbursement

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

City
PittsgroveState
NJZip Code
08318

FEC Identification Number

C

Purpose of Disbursement
Printing Services

Candidate Name

006
Category/
Type

Amount of Each Disbursement this Period

414.00

Transaction ID : SB17.4339

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. C My Kolor Graphics

Mailing Address 671 Upper Neck Road

Date of Disbursement

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

City
PittsgroveState
NJZip Code
08318

FEC Identification Number

C

Purpose of Disbursement
Printing Services

Candidate Name

006
Category/
Type

Amount of Each Disbursement this Period

165.27

Transaction ID : SB17.4336

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

760.94

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

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

PAGE 18 OF 24

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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. C My Kolor Graphics

Mailing Address 671 Upper Neck Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		12		2025

City
PittsgroveState
NJZip Code
08318

FEC Identification Number

C

Purpose of Disbursement
Printing Services

006

Amount of Each Disbursement this Period

255.00

Transaction ID : SB17.4338

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Control Point Group

Mailing Address 458 New Jersey Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2025

City
WashingtonState
DCZip Code
20003

FEC Identification Number

C

Purpose of Disbursement
Digital FundraisingCategory/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4372

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FaceBook

Mailing Address 1 Meta Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		29		2025

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

004

Amount of Each Disbursement this Period

86.65

Transaction ID : SB17.4332

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

2841.65

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. Fulton Bank

Mailing Address Jimmie Leeds Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2025

City
GallowayState
NJZip Code
08025

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

303.00

Transaction ID : SB17.4456

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. NGP VANMailing Address 1445 New York Avenue
Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2025

City
WashingtonState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
Software Service

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4340

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 1445 New York Avenue
Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2025

City
WashingtonState
DCZip Code
20005

FEC Identification Number

C

Purpose of Disbursement
Software Service

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4342

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1603.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4343

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4344

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4345

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1950.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

682.50

Transaction ID : SB17.4346

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4349

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

682.50

Transaction ID : SB17.4351

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2015.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4355

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NGP VANMailing Address 1445 New York Avenue
Suite 200City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software Service

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

650.00

Transaction ID : SB17.4356

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. S. Davis Media

Mailing Address 1900 Market Stree

City
PhiladelphiaState
PAZip Code
19103Purpose of Disbursement
Social Media

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4334

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1800.00

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

10970.59

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

PAGE 23 OF 24

☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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

NAME OF COMMITTEE (In Full)

ALEXANDER_2026

Full Name (Last, First, Middle Initial)

A. Stenton SaraJane

Mailing Address 320 Bittlewood Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2025

City
BerlinState
NJZip Code
08009

FEC Identification Number

C

Purpose of Disbursement

Money withdrawn from wrong committee, will be corrected on next report

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3300.00

Transaction ID : SB20A.4373

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

3300.00

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

3300.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 24

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4424

ALEXANDER_2026

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

ALEXANDER, TIMOTHY C, , ,

Mailing Address

PO Box 818

City

Oceanville

State

NJ

ZIP Code

08205

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 13 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NA

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

2000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.