

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 TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 279 GORGE ROAD STE 203 Check if different than previously reported. (ACC) CLIFFSIDE PARK NJ 07010

2. FEC IDENTIFICATION NUMBER C C00487181 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (X), Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on M M M / D D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2011 through 06 / 30 / 2011

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 Ali Cinar

Signature of Treasurer Ali Cinar [Electronically Filed] Date 01 / 30 / 2012

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)

Write or Type Committee Name

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

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="2011"/>	<input type="text" value="74.12"/>	<input type="text" value="74.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="74.12"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="24550.00"/>	<input type="text" value="24550.00"/>
(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="24624.12"/>	<input type="text" value="24624.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15604.13"/>	<input type="text" value="15604.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9019.99"/>	<input type="text" value="9019.99"/>
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

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

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).....	24450.00	24450.00
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	24550.00	24550.00
(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)	24550.00	24550.00
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.).....	0.00	0.00
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))..... ▶	24550.00	24550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24550.00	24550.00

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	2104.13	2104.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2104.13	2104.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	13500.00
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	0.00
(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	0.00
29. Other Disbursements	0.00	0.00
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)) ..	15604.13	15604.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15604.13	15604.13

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)	24550.00	24550.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24550.00	24550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	2104.13	2104.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	2104.13	2104.13

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

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

NAME OF COMMITTEE (In Full)
TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Orhan Ayalsi		Date of Receipt MM / DD / YYYY 06 / 19 / 2011 Transaction ID : SA11AI.4271
Mailing Address 75 Hawthorne Village Rd.		Amount of Each Receipt this Period 5000.00
City Nashua	State NH	
Zip Code 03062		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Good Foods Inc.	Occupation Consulting	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Bayar Ayasli		Date of Receipt MM / DD / YYYY 06 / 27 / 2011 Transaction ID : SA11AI.4272
Mailing Address 75 Hawthorne Village Rd.		Amount of Each Receipt this Period 5000.00
City Nashua	State NH	
Zip Code 03062		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Student	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Serpil Ayasli		Date of Receipt MM / DD / YYYY 03 / 31 / 2011 Transaction ID : SA11AI.4211
Mailing Address 75 Hawthorne Village Rd.		Amount of Each Receipt this Period 5000.00
City Nashua	State NH	
Zip Code 03062		Aggregate Year-to-Date ▼ 5000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 7 OF 13
<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)
TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Yalcin Ayasli		Date of Receipt
Mailing Address 75 Hawthorne Village Rd.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Nashua	NH	03062
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4210
Hittite Microwave Corp.	Scientist	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. Tomris Azeri		Date of Receipt
Mailing Address 20 Skyview Terrace		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
City	State	Zip Code
Clifton	NJ	07013
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4269
Self	Consultant	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) C. Mehmet Halici		Date of Receipt
Mailing Address 4620 N. Park Ave., Apt. 701W		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
City	State	Zip Code
Chevy Chase	MD	20813
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.4241
Self	Real Estate	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="325.00"/>	<input type="text" value="325.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6325.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

A. Ergun Kirlikovali
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Long View Rd.
 City Coto De Caza State CA Zip Code 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Business Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2011
Transaction ID : SA11AI.4273
 Amount of Each Receipt this Period
 1000.00

B. Haze McCrary
 Full Name (Last, First, Middle Initial)
 Mailing Address 4833 Bethesda Ave.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Broad Street LLC Occupation Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2125.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2011
Transaction ID : SA11AI.4212
 Amount of Each Receipt this Period
 2125.00

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) ▼
 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).....▶	3125.00
TOTAL This Period (last page this line number only).....▶	24450.00

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

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

FOR LINE NUMBER:
(check only one)

<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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1 Raymond West Plaza

City Newark State NJ Zip Code 07102

Purpose of Disbursement
PAC Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4207

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Huckaby Davis Lisker Inc.

Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Compliance Services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4201

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address PO Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement
Online Processing fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4275

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANDRE CARSON FOR CONGRESS

Mailing Address P.O. BOX 1863

City INDIANAPOLIS State IN Zip Code 46206

Purpose of Disbursement Contribution

011

Candidate Name

ANDRE CARSON

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: IN District: 07

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2011

Transaction ID : SB23.4223

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT ED TOWNS

Mailing Address 438 LEWIS AVENUE

City BROOKLYN State NY Zip Code 11233

Purpose of Disbursement Contribution

011

Candidate Name

EDOLPHUS TOWNS

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: NY District: 10

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2011

Transaction ID : SB23.4214

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. ELLISON FOR CONGRESS

Mailing Address PO BOX 6072

City MINNEAPOLIS State MN Zip Code 55406

Purpose of Disbursement Contribution

011

Candidate Name

KEITH MAURICE ELLISON

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: MN District: 05

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2011

Transaction ID : SB23.4219

Amount of Each Disbursement this Period

500.00

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FREDERICA S. WILSON FOR CONGRESS

Mailing Address 19821 NW 2ND AVENUE
BOX 354

City MIAMI GARDENS State FL Zip Code 33169

Purpose of Disbursement
Contribution

011

Candidate Name

FREDERICA S. WILSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 17

Date of Disbursement

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

Transaction ID : **SB23.4247**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	1

Transaction ID : **SB23.4265**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. RAUL LABRADOR FOR IDAHO

Mailing Address PO BOX 1616

City BOISE State ID Zip Code 83701

Purpose of Disbursement
Contribution

011

Candidate Name

RAUL LABRADOR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: ID District: 01

Date of Disbursement

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

Transaction ID : **SB23.4257**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

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

6	5	0	0	0	0	0	0	0	0

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

6	5	0	0	0	0	0	0	0	0

**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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ROS-LEHTINEN FOR CONGRESS

Mailing Address PO BOX 522784

City MIAMI State FL Zip Code 33152

Purpose of Disbursement
Contribution

011

Candidate Name

ILEANA HON. ROS-LEHTINEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 18

Date of Disbursement

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

Transaction ID : **SB23.4251**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. SIRES FOR CONGRESS

Mailing Address 6050 Blvd. East
Apt. 6B

City West New York State NJ Zip Code 07093

Purpose of Disbursement
Void Check issued 106/10

011

Candidate Name

ALBIO SIRES

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NJ District: 13

Date of Disbursement

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

Transaction ID : **SB23.4362**

Amount of Each Disbursement this Period

-	1	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. STEVE CHABOT FOR CONGRESS

Mailing Address 3030 HARRISON AVE.

City CINCINNATI State OH Zip Code 45211

Purpose of Disbursement
Contribution

011

Candidate Name

STEVE CHABOT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 01

Date of Disbursement

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

Transaction ID : **SB23.4261**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

2	5	0	0	.	0	0
---	---	---	---	---	---	---

**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)

TURKISH COALITION NEW JERSEY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. STEVE COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH PLACE

City MEMPHIS State TN Zip Code 38112

Purpose of Disbursement
Contribution

011

Candidate Name

STEPHEN IRA COHEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2011

Transaction ID : SB23.4227

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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)..... ▶

1000.00

13500.00
