

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

LoBiondo for Congress

ADDRESS (number and street) 195 Silver Lake Road

Check if different than previously reported. (ACC)

Bridgeton

NJ

08302

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00269340

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

x

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 MM/DD/YYYY in the State of

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

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

Election on MM/DD/YYYY in the State of

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

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

Type or Print Name of Treasurer Watkins, Nancy, H, ,

Signature of Treasurer Watkins, Nancy, H, ,

[Electronically Filed]

Date

MM/DD/YYYY 01/16/2023

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

Table with 7 columns for Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
LoBiondo for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3045.00	24896.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	3778.62	3105.82
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	- 733.62	21790.93
8. Cash on Hand at Close of Reporting Period (from Line 27).....		
	142238.18	
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).....		
	0.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name
LoBiondo for Congress

Report Covering the Period: From: 10 / 01 / 2022 To: 12 / 31 / 2022

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 08 / 2022 (date of general election)	COLUMN C Total for 11 / 09 / 2022 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
0.00	0.00	0.00
(ii) Unitemized		
0.00	0.00	0.00
(iii) Total of contributions from individuals		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 9

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
0.00	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
3778.62	3105.82	3100.18
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
3.54	14591.40	2.34
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
3782.16	17697.22	3102.52

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 9

Write or Type Committee Name

LoBiondo for Congress

Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y
10		01		2022

To:

M M	/	D D	/	Y Y Y Y
12		31		2022

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	3045.00	24896.75	2030.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00	0.00
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00	0.00
(b) Of All Other Loans	0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	0.00
(b) Political Party Committees	0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 9

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
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21. OTHER DISBURSEMENTS

0.00	39600.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

3045.00	64496.75	2030.00
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

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

0.00	0.00	0.00
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IV. NET OPERATING EXPENDITURES

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

- 733.62	21790.93	- 1070.18
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	141501.02
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	3782.16
25. SUBTOTAL (add Line 23 and Line 24).....	145283.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3045.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	142238.18

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 9	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)
LoBiondo for Congress

A. Full Name (Last, First, Middle Initial)
McCrosson, Andrew, J., , Jr.

Mailing Address 29 Daisy Drive

City Egg Harbor Township	State NJ	Zip Code 08234
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FEC ID number of contributing federal political committee. **C**

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

Election Cycle-to-Date ▼
17664.80

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2022

Transaction ID : SA14.4594

Amount of Each Receipt this Period
678.44

Memo Item
restitution payment

B. Full Name (Last, First, Middle Initial)
McCrosson, Andrew, J., , Jr.

Mailing Address 29 Daisy Drive

City Egg Harbor Township	State NJ	Zip Code 08234
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3100.18

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 15 / 2022

Transaction ID : SA14.4599

Amount of Each Receipt this Period
3100.18

Memo Item
restitution payment

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3778.62
TOTAL This Period (last page this line number only)..... ▶	3778.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LoBiondo for Congress

Full Name (Last, First, Middle Initial) A. Ocean First Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2022
Mailing Address 475 Hooper Avenue		FEC Identification Number C
City Toms River	State NJ	Zip Code 08753
Purpose of Disbursement service charge		Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	Transaction ID : SB17.4596
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Robert Watkins & Company		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2022
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	Transaction ID : SB17.4589
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Robert Watkins & Company		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2022
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	Transaction ID : SB17.4593
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LoBiondo for Congress

Full Name (Last, First, Middle Initial) A. Robert Watkins & Company		Date of Disbursement
Mailing Address 610 S. Boulevard		M M / D D / Y Y Y Y 12 / 01 / 2022
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.4597
State: District:		<input type="checkbox"/> Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	3015.00