

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                         |             |                                                      |                                |                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------------------------------------|
| 1. NAME OF COMMITTEE IN FULL<br>Herb Conaway for Congress                                                                                                               |             |                                                      |                                |                                                                                                             |
| ADDRESS (number and street) PO Box 493                                                                                                                                  |             |                                                      |                                |                                                                                                             |
| CITY<br>Willingboro                                                                                                                                                     |             | STATE<br>NJ                                          |                                | ZIP CODE<br>08046                                                                                           |
| 2. NAME OF CANDIDATE<br>Conaway, Herb, , MD                                                                                                                             |             | 3. OFFICE SOUGHT (State and District)<br>House NJ 03 |                                | 4. FEC IDENTIFICATION NUMBER<br>C00859496                                                                   |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |             |                                                      |                                |                                                                                                             |
| A. FULL NAME<br>Eisenreich, Avery, , ,                                                                                                                                  |             | Name of Employer<br>JCH Associates                   |                                | Date (month, day, year)<br>05/30/2024                                                                       |
| MAILING ADDRESS<br>175 Belgrove Dr                                                                                                                                      |             | Transaction ID : 3212050                             |                                | Amount<br>3000.00                                                                                           |
| CITY<br>Kearny                                                                                                                                                          | STATE<br>NJ | ZIP CODE<br>07032-1507                               | Occupation<br>Business Owner   |                                                                                                             |
| B. FULL NAME<br>921 Elizabeth Avenue, LLC                                                                                                                               |             | Name of Employer                                     |                                | Date (month, day, year)<br>05/30/2024                                                                       |
| MAILING ADDRESS<br>921 Elizabeth Ave                                                                                                                                    |             | Transaction ID : 3212060                             |                                | Amount<br>3300.00                                                                                           |
| CITY<br>Elizabeth                                                                                                                                                       | STATE<br>NJ | ZIP CODE<br>07201-2991                               | Occupation                     |                                                                                                             |
| C. FULL NAME<br>Foglio, Tracy, , ,                                                                                                                                      |             | Name of Employer<br>Tracy Foglio                     |                                | Date (month, day, year)<br>05/30/2024                                                                       |
| MAILING ADDRESS<br>161 Parsons Ln                                                                                                                                       |             | Transaction ID : 3211980                             |                                | Amount<br>3300.00                                                                                           |
| CITY<br>Newtown                                                                                                                                                         | STATE<br>PA | ZIP CODE<br>18940-4124                               | Occupation<br>Insurance Broker |                                                                                                             |
| D. FULL NAME<br>McCarthy, Daniel, J, ,                                                                                                                                  |             | Name of Employer<br>Rogut McCarthy                   |                                | Date (month, day, year)<br>05/30/2024                                                                       |
| MAILING ADDRESS<br>719 Lawrence Ave                                                                                                                                     |             | Transaction ID : 3212051                             |                                | Amount<br>1000.00                                                                                           |
| CITY<br>Westfield                                                                                                                                                       | STATE<br>NJ | ZIP CODE<br>07090-3801                               | Occupation<br>Attorney         |                                                                                                             |
| E. FULL NAME<br>22-24 South Seventh Street LLC                                                                                                                          |             | Name of Employer                                     |                                | Date (month, day, year)<br>05/30/2024                                                                       |
| MAILING ADDRESS<br>22 -24 S 7TH St                                                                                                                                      |             | Transaction ID : 3212061                             |                                | Amount<br>2500.00                                                                                           |
| CITY<br>Elizabeth                                                                                                                                                       | STATE<br>NJ | ZIP CODE<br>07202                                    | Occupation                     |                                                                                                             |
| SIGNATURE (optional)<br>Montoya, Dacey, , ,                                                                                                                             |             |                                                      | DATE<br>05/31/2024             | For further information,<br>contact the Federal Election Commission<br>at 800-424-9530 or visit www.fec.gov |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

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| 1. NAME OF COMMITTEE IN FULL<br>Herb Conaway for Congress                                                                                                               |  |                                                                                                     |  |
| ADDRESS (number and street) PO Box 493                                                                                                                                  |  |                                                                                                     |  |
| CITY, STATE, and ZIP CODE<br>Willingboro NJ 08046                                                                                                                       |  |                                                                                                     |  |
| 2. NAME OF CANDIDATE<br>Conaway, Herb, , , MD                                                                                                                           |  | 3. OFFICE SOUGHT (State and District)<br>House NJ 03                                                |  |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00859496                                                           |  |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                                                                     |  |
| continuation page                                                                                                                                                       |  |                                                                                                     |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Ramirez, Irene, , ,<br>403 N Nora Ave<br>West Covina CA 91790-1517                                                        |  | Name of Employer<br>Self Employed<br>Transaction ID : 3211981<br>Occupation<br>Realtor              |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/30/2024                                                               |  |
|                                                                                                                                                                         |  | Amount<br>2000.00                                                                                   |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Kurland, Benjamin, , ,<br>102 Reagan Ct<br>Lakewood NJ 08701-3263                                                         |  | Name of Employer<br>Allaire Health Services<br>Transaction ID : 3212052<br>Occupation<br>CEO        |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/30/2024                                                               |  |
|                                                                                                                                                                         |  | Amount<br>3000.00                                                                                   |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>J&J Builders LLC<br>711 Commerce Rd<br>Linden NJ 07036-2422                                                               |  | Name of Employer<br>Transaction ID : 3212062<br>Occupation                                          |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/30/2024                                                               |  |
|                                                                                                                                                                         |  | Amount<br>3300.00                                                                                   |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Novo Nordisk Inc PAC<br>1000 F St NW<br>FI 4<br>Washington DC 20004-1514                                                  |  | Name of Employer<br>Transaction ID : 3211772<br>Occupation                                          |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/30/2024                                                               |  |
|                                                                                                                                                                         |  | Amount<br>2500.00                                                                                   |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Merino, Miguel, , ,<br>1130 Fairmount Ave<br>Elizabeth NJ 07201-1277                                                      |  | Name of Employer<br>Fresh & Clean Painting LLC<br>Transaction ID : 3212054<br>Occupation<br>Painter |  |
|                                                                                                                                                                         |  | Date (month, day, year)<br>05/30/2024                                                               |  |
|                                                                                                                                                                         |  | Amount<br>2000.00                                                                                   |  |

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| ADDRESS (number and street) PO Box 493                                                                                                                                  |  |                                                      |  |
| CITY, STATE, and ZIP CODE<br>Willingboro NJ 08046                                                                                                                       |  |                                                      |  |
| 2. NAME OF CANDIDATE<br>Conaway, Herb, , MD                                                                                                                             |  | 3. OFFICE SOUGHT (State and District)<br>House NJ 03 |  |
|                                                                                                                                                                         |  | 4. FEC IDENTIFICATION NUMBER<br>C00859496            |  |
| 5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                      |  |
| continuation page                                                                                                                                                       |  |                                                      |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |  |
| American College Of OB-GYNS PAC                                                                                                                                         |  | Name of Employer                                     |  |
| 409 12Th St SW                                                                                                                                                          |  | Date (month, day, year)                              |  |
| Washington DC 20024-2125                                                                                                                                                |  | 05/30/2024                                           |  |
|                                                                                                                                                                         |  | Amount                                               |  |
|                                                                                                                                                                         |  | 5000.00                                              |  |
|                                                                                                                                                                         |  | Transaction ID : 3211764                             |  |
|                                                                                                                                                                         |  | Occupation                                           |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |  |
| Ledan Holdings LLC                                                                                                                                                      |  | Name of Employer                                     |  |
| PO Box 6                                                                                                                                                                |  | Date (month, day, year)                              |  |
| Florham Park NJ 07932-0006                                                                                                                                              |  | 05/30/2024                                           |  |
|                                                                                                                                                                         |  | Amount                                               |  |
|                                                                                                                                                                         |  | 3300.00                                              |  |
|                                                                                                                                                                         |  | Transaction ID : 3212064                             |  |
|                                                                                                                                                                         |  | Occupation                                           |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |  |
| Flores Alas, Ismael, D, ,                                                                                                                                               |  | Name of Employer                                     |  |
| 24 Mary Ave                                                                                                                                                             |  | Date (month, day, year)                              |  |
| Fords NJ 08863-1713                                                                                                                                                     |  | 05/30/2024                                           |  |
|                                                                                                                                                                         |  | Amount                                               |  |
|                                                                                                                                                                         |  | 2000.00                                              |  |
|                                                                                                                                                                         |  | Transaction ID : 3212055                             |  |
|                                                                                                                                                                         |  | Occupation                                           |  |
|                                                                                                                                                                         |  | Painter                                              |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |  |
| Operating Engineers Local 825                                                                                                                                           |  | Name of Employer                                     |  |
| 65 Springfield Ave                                                                                                                                                      |  | Date (month, day, year)                              |  |
| Springfield NJ 07081-1308                                                                                                                                               |  | 05/31/2024                                           |  |
|                                                                                                                                                                         |  | Amount                                               |  |
|                                                                                                                                                                         |  | 5000.00                                              |  |
|                                                                                                                                                                         |  | Transaction ID : 3212065                             |  |
|                                                                                                                                                                         |  | Occupation                                           |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  |                                                      |  |
| Bange, Michael, F, ,                                                                                                                                                    |  | Name of Employer                                     |  |
| 1059 Coolidge St                                                                                                                                                        |  | Date (month, day, year)                              |  |
| Cranford NJ 07016-1604                                                                                                                                                  |  | 05/30/2024                                           |  |
|                                                                                                                                                                         |  | Amount                                               |  |
|                                                                                                                                                                         |  | 3300.00                                              |  |
|                                                                                                                                                                         |  | Transaction ID : 3212056                             |  |
|                                                                                                                                                                         |  | Occupation                                           |  |
|                                                                                                                                                                         |  | Construction                                         |  |

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| continuation page                                                                                                                                                       |  |                                                                                                                                                              |  |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Senior Living Solutions LLC<br>395 Arnwell Rd<br>Hillsborough NJ 08844                                                    |  | Name of Employer<br>Date (month, day, year)<br>05/30/2024<br>Amount<br>3000.00<br>Transaction ID : 3212058<br>Occupation                                     |  |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>921 Elizabeth Avenue, LLC<br>921 Elizabeth Ave<br>Elizabeth NJ 07201-2991                                                 |  | Name of Employer<br>Date (month, day, year)<br>05/30/2024<br>Amount<br>3300.00<br>Transaction ID : 3212059<br>Occupation                                     |  |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Serve America PAC<br>PO Box 2013<br>Salem MA 01970-6213                                                                   |  | Name of Employer<br>Date (month, day, year)<br>05/30/2024<br>Amount<br>5000.00<br>Transaction ID : 3211769<br>Occupation                                     |  |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE<br>Foglio, Tracy, , ,<br>161 Parsons Ln<br>Newtown PA 18940-4124                                                             |  | Name of Employer<br>Tracy Foglio<br>Date (month, day, year)<br>05/30/2024<br>Amount<br>3300.00<br>Transaction ID : 3211979<br>Occupation<br>Insurance Broker |  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE                                                                                                                              |  | Name of Employer<br>Date (month, day, year)<br>Amount<br>Occupation                                                                                          |  |