

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 Friends of Chris Smith				
ADDRESS (number and street) PO Box 1266				
CITY Toms River		STATE NJ		ZIP CODE 08754-1266
2. NAME OF CANDIDATE Smith, Christopher, H, ,		3. OFFICE SOUGHT (State and District) House NJ 04		4. FEC IDENTIFICATION NUMBER C00096412
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				

A. FULL NAME Marmelstein, Jacob, , Mr.,			Name of Employer Ray Builders	Date (month, day, year) 11/02/2022	Amount 2500.00
MAILING ADDRESS 30 Whispering Pines Lane			Transaction ID : 671495367D67348F1A		
CITY Lakewood	STATE NJ	ZIP CODE 08701-1470	Occupation CEO		
B. FULL NAME Marmelstein, Sara, , Mrs.,			Name of Employer retired	Date (month, day, year) 11/02/2022	Amount 2500.00
MAILING ADDRESS 30 Whispering Pines Lane			Transaction ID : 60A36527BB8134E00		
CITY Lakewood	STATE NJ	ZIP CODE 08701-1470	Occupation retired		
C. FULL NAME Tendios, Steve, , Mr.,			Name of Employer ST Management Grp, LLC	Date (month, day, year) 11/02/2022	Amount 1000.00
MAILING ADDRESS 10 Cambridge Place			Transaction ID : 63162A0CCB1A74CE		
CITY Englewood Cliffs	STATE NJ	ZIP CODE 07632-2043	Occupation Owner		
D. FULL NAME Heinemann, Moe, , Mr.,			Name of Employer Fellowship Warehousing & Logistics	Date (month, day, year) 11/02/2022	Amount 2900.00
MAILING ADDRESS 28 Meadow Run Ct			Transaction ID : 62898342C6B3349DF		
CITY Jackson	STATE NJ	ZIP CODE 08527-4070	Occupation CEO		
E. FULL NAME Freiner, Edon, , Mr.,			Name of Employer Fellowship Co	Date (month, day, year) 11/02/2022	Amount 2900.00
MAILING ADDRESS 28 Queens Ct			Transaction ID : 62AC8CBF9D7DC45E		
CITY Lakewood	STATE NJ	ZIP CODE 08701-2345	Occupation software		
SIGNATURE (optional) Roldan, Mary, , ,			DATE 11/02/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	
[Electronically Filed]					

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.

FEC FORM 6

(Revised 03/2016)

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F6N

Transaction ID :

According to FEC regulations, the Threshold Amount for Form 6 is \$1,000.00

Form/Schedule:

Transaction ID:

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4. FEC IDENTIFICATION NUMBER C00096412		continuation page	
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A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
Hillel, David, , Mr., 210 Leonex Long Branch NJ 07740-5046	DKH Enterprises Transaction ID : 6E2BFFC277EDC4A71AB1 Occupation CEO	11/02/2022	2900.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Gross, Shani, , Mrs., 19 Kings Ct Lakewood NJ 08701-2331	The Special Children's School Transaction ID : 6D82ED6BB19CF46FC936 Occupation Program Director	11/02/2022	2900.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Gross, Chaim, , Mr., 19 Kings Street Lakewood NJ 08701-2331	Lakewood Candies LLC Transaction ID : 6729EFE71E8D449AB894 Occupation Owner	11/02/2022	2900.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Gordon, Yakov, , Mr., 2 Trudy Lane Lakewood NJ 08701-4676	Fellowship Co Transaction ID : 6FD7DAE651D5A4B12ACC Occupation Controller	11/02/2022	2900.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Byron Donalds For Congress 136 Conant St C/O Red Curve Solutions Beverly MA 01915-1661	Name of Employer Transaction ID : 610E94D9E288E42449A4 Occupation	11/02/2022	2000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE National Assn. of Postal Supervisors PAC 1727 King St Attn: Katie Maddocks, PAC Manager Alexandria VA 22314-2700			
Name of Employer		Date (month, day, year) 11/02/2022	
Transaction ID : 621572E4CD4034558889		Amount 1000.00	
Occupation		Amount	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Occupation		Amount	