

# 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

Pallone for Congress

ADDRESS (number and street)

PO Box 3176

Check if different than previously reported. (ACC)

Long Branch

NJ

07740

2. FEC IDENTIFICATION NUMBER ▼

C C00226928

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NJ

06

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  
05 / 15 / 2014

through

M M / D D / Y Y Y Y  
06 / 30 / 2014

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 Warren Goode

Signature of Treasurer Warren Goode

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
07 / 14 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Pallone 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))....	125405.00	1314118.37
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	3400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	125405.00	1310718.37
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	64493.70	725405.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	44899.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64493.70	680505.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	916261.73	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Pallone for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	41175.00	520722.15
(ii) Unitemized.....	1480.00	14135.00
(iii) TOTAL of contributions from individuals ▶	42655.00	534857.15
(b) Political Party Committees.....	0.00	11.22
(c) Other Political Committees (such as PACs).....	82750.00	779250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	125405.00	1314118.37
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	45000.00	670000.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	44899.51
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	5.30	2552.62
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	170410.30	2031570.50

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64493.70	725405.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	3304453.33
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 .....	0.00	3400.00
(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)).....	0.00	3400.00
21. OTHER DISBURSEMENTS .....	91515.00	542985.50
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	156008.70	4576244.06

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	901860.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	170410.30
25. SUBTOTAL (add Line 23 and Line 24).....	1072270.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	156008.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	916261.73

**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 5 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Kaufman**

Mailing Address 52 Maidenhead Road

City State Zip Code  
Princeton NJ 08540-7733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kaufman Zita Group Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036733**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul N. Bontempo**

Mailing Address 8 Carla Court

City State Zip Code  
Morristown NJ 07960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MBI-GluckShaw Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036731**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Leecia R. Eve**

Mailing Address 141 West 139th Street

City State Zip Code  
New York NY 10030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Verizon Communications Inc Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036732**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 6 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael A. Mason**

Mailing Address 17 East Ash Street

City Basking Ridge State NJ Zip Code 07820

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Communications Inc Occupation Chief Security Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036734**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Mike E. McKay**

Mailing Address 1000 Connecticut Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Empire Consulting Group Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036735**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Craig L. Silliman**

Mailing Address 6 Highland Avenue

City Madison State NJ Zip Code 07940

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Communications Inc Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11ai-000036736**

Amount of Each Receipt this Period  
 2000.00

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

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

4000.00

**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 7 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas J. Edwards**

Mailing Address 3324 3rd Street North

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Verizon Communications Inc Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11ai-000036737**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Samuel A. Delgado**

Mailing Address 535 Highland Avenue

City State Zip Code  
Newark NJ 07104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Verizon Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11ai-000036789**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Henry A. Terhune**

Mailing Address 1333 New Hampshire Avenue NW

City State Zip Code  
Washington DC 20036-1500

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Akin Gump Strauss Hauer & Feld Attorney/Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11ai-000036796**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

**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 8 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ulises E. Diaz**

Mailing Address 170 Vanderburgh Avenue

City Rutherford State NJ Zip Code 07070

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11ai-000036790**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Rose M. Stuckey-Kirk**

Mailing Address 470 Schooleys Mountain Road

City Hackettstown State NJ Zip Code 07840

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Foundation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11ai-000036791**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Douglas W. Schoenberger**

Mailing Address 19 North Greenwood Avenue

City Hopewell State NJ Zip Code 08525

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11ai-000036793**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00



**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 9 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marilyn Berry Thompson**

Mailing Address 901 New York Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer MWW Group Inc Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11ai-000036829**

Amount of Each Receipt this Period  
 1000.00

Earmarked Contribution Through ActBlue.

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Grillo**

Mailing Address 1320 North Danville Street

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11ai-000036830**

Amount of Each Receipt this Period  
 1000.00

Earmarked Contribution Through ActBlue.

**C.** Full Name (Last, First, Middle Initial)  
**Victor Herlinsky**

Mailing Address 161 Ridge Road

City Rutherford State NJ Zip Code 07070

FEC ID number of contributing federal political committee. **C**

Name of Employer Sills Cummis & Gross Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11ai-000036831**

Amount of Each Receipt this Period  
 1000.00

Earmarked Contribution Through ActBlue.

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

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

3000.00

**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 10 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Roger A. Mott**

Mailing Address 7216 Countrywood Court

City Springfield State VA Zip Code 22151-3320

FEC ID number of contributing federal political committee. **C**

Name of Employer RM Strategies Occupation Principal/Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 11ai-000036792**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**David Simkowitz**

Mailing Address 268 Willoughby Avenue

City Brooklyn State NY Zip Code 11205

FEC ID number of contributing federal political committee. **C**

Name of Employer Simkowitz Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 11ai-000036794**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Donna Epps**

Mailing Address 13220 Moonlight Trail Drive

City Silver Spring State MD Zip Code 20902

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : 11ai-000036834**

Amount of Each Receipt this Period  
 1000.00

Earmarked Contribution Through ActBlue.

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 11 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Zacharia**

Mailing Address 8016 Hampton Lane

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Verizon Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : 11ai-000036835**

Amount of Each Receipt this Period  
500.00

Earmarked Contribution Through ActBlue.

**B.** Full Name (Last, First, Middle Initial)  
**Mashantucket Pequot Tribal Nation**

Mailing Address 1299 Pennsylvania Avenue NW #1250

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036808**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Saginaw Chippewa Indian Tribe**

Mailing Address 7070 East Broadway

City State Zip Code  
Mount Pleasant MI 48858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036812**

Amount of Each Receipt this Period  
900.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 88  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Saginaw Chippewa Indian Tribe**

Mailing Address 7070 East Broadway

City State Zip Code  
Mount Pleasant MI 48858

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036811**

Amount of Each Receipt this Period  
 1100.00

3500.00

**B.** Full Name (Last, First, Middle Initial)  
**Harold L. Hodes**

Mailing Address 414 Riverview Plaza

City State Zip Code  
Trenton NJ 08611-3420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Public Strategies Impact Government Relations

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036805**

Amount of Each Receipt this Period  
 1000.00

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Tracy Spicer**

Mailing Address 5105 Nahant Street

City State Zip Code  
Bethesda MD 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Avenue Solutions Principal

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036807**

Amount of Each Receipt this Period  
 2500.00

2500.00

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

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

4600.00

**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 13 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pokagon Band of Potawatomi Indians**

Mailing Address 58620 Sink Road

City Dowagiac State MI Zip Code 49047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036809**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Pokagon Band of Potawatomi Indians**

Mailing Address 58620 Sink Road

City Dowagiac State MI Zip Code 49047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036810**

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
**Diane E. Robertson**

Mailing Address 2824 Greenvale Street

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11ai-000036806**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

**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 14 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ivan Saiff**

Mailing Address 7401 Lahana Circle

City State Zip Code  
Boynton Beach FL 33437

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2014

**Transaction ID : 11ai-000036886**

Amount of Each Receipt this Period  
25.00

Earmarked Contribution Through ActBlue

**B.** Full Name (Last, First, Middle Initial)  
**Ivan Saiff**

Mailing Address 7401 Lahana Circle

City State Zip Code  
Boynton Beach FL 33437

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
825.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : 11ai-000036887**

Amount of Each Receipt this Period  
25.00

Earmarked Contribution Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**Daniel Mullin**

Mailing Address 15 Van Pelt Court

City State Zip Code  
Skillman NJ 08558

FEC ID number of contributing federal political committee. **C**

Name of Employer Verizon Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : 11ai-000036888**

Amount of Each Receipt this Period  
1000.00

Earmarked Contribution Through ActBlue

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 15 OF 88  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John A. Hoffman**

Mailing Address 8211 Westover Way

City Somerset State NJ Zip Code 08873

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilentz Goldman & Spitzer PA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036843**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Roy Tanzman**

Mailing Address 4 Talia Road

City Kendall Park State NJ Zip Code 08824-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilentz Goldman & Spitzer PA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036852**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter Visceglia**

Mailing Address 74 South Street

City Red Bank State NJ Zip Code 07701-2214

FEC ID number of contributing federal political committee. **C**

Name of Employer Federal Business Systems Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036854**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

**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 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charlotte Quaintance**

Mailing Address 235 Lincoln Avenue

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036848**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Efrem M. Gerszberg**

Mailing Address 450 Harrison Avenue

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer George Foreman Enterprises Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036841**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Elsie Foster-Dublin**

Mailing Address 408 South 9th Avenue

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036839**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00



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

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

FOR LINE NUMBER: PAGE 17 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barnett E. Hoffman**

Mailing Address 58 Harrison Avenue

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Borrus Goldin Foley Vignuolo Hyman & S Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036842**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Bruce S. Morgan**

Mailing Address 222 Benner Street

City Highland Park State NJ Zip Code 08904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Buckeye Pipeline LLC Pipeline Controller

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036846**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Weiss**

Mailing Address 53 Hamlin Road

City Edison State NJ Zip Code 08817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Weiss Properties President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : 11ai-000036855**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harold Bobrow**

Mailing Address **PO Box 310**

City **Maplewood** State **NJ** Zip Code **07040-0310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Generation Pharmacy Group** Occupation **Pharmacist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1050.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : 11ai-000036860**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Lee D. Eisenberg**

Mailing Address **224 Berkshire Road**

City **Hasbrouck Heights** State **NJ** Zip Code **07604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ENT & Allergy Associates LLC** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : 11ai-000036862**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Aaron**

Mailing Address **8 Matilda Drive**

City **Ocean** State **NJ** Zip Code **07712**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Shore Heart Group** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : 11ai-000036857**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

**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 19 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Renato A. Apolito**

Mailing Address 12 Oxford Key

City State Zip Code  
Colts Neck NJ 07722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036858**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Jack Ebani**

Mailing Address 50 Old Farm Road

City State Zip Code  
Oakhurst NJ 07755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036861**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Sandy Hsyu**

Mailing Address 3001 Jockey Hollow Drive

City State Zip Code  
Toms River NJ 08755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036864**

Amount of Each Receipt this Period  
250.00

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

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

750.00

**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 20 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edmund T. Karam**

Mailing Address 627 Point Avenue

City State Zip Code  
Brick NJ 08724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036865**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Haroon Khan**

Mailing Address 23 Harness Lane

City State Zip Code  
Marlboro NJ 07746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036866**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Julie Master**

Mailing Address 12 Sussex Road

City State Zip Code  
Holmdel NJ 07733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036868**

Amount of Each Receipt this Period  
250.00

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 21 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leonard Louis Sandler**

Mailing Address 1820 State Route 33

City State Zip Code  
Neptune NJ 07753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036869**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Maurice D. Weiss**

Mailing Address 19 Rancho Polo

City State Zip Code  
Colts Neck NJ 07722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shore Heart Group Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : 11ai-000036870**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Peter Begans**

Mailing Address 1605 Charnita Court

City State Zip Code  
Vienna VA 22182

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Scan Health Plans Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11ai-000036859**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

**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 22 OF 88
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lisa Kountoupes**

Mailing Address 2016 Rhode Island Avenue

City McLean	State VA	Zip Code 22101-4921
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Kountoupes Consulting LLC	Occupation Government Relations
---	------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2014

**Transaction ID : 11ai-000036928**

Amount of Each Receipt this Period  
500.00

Earmarked Contribution Through ActBlue

**B.** Full Name (Last, First, Middle Initial)  
**Glen David Mason**

Mailing Address 2625 North Pocomoke Street

City Arlington	State VA	Zip Code 22207
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Mason Consulting LLC	Occupation Principal
--	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2014

**Transaction ID : 11ai-000036867**

Amount of Each Receipt this Period  
750.00

**C.** Full Name (Last, First, Middle Initial)  
**Steven Reichenstein**

Mailing Address 250 Ridgedale Avenue

City Florham Park	State NJ	Zip Code 07932
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Biomart LLC	Occupation CEO
---------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2014

**Transaction ID : 11ai-000036930**

Amount of Each Receipt this Period  
25.00

Earmarked Contribution Through ActBlue

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

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

1275.00

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

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

FOR LINE NUMBER: PAGE 23 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Poarch Band of Creek Indians**

Mailing Address 5811 Jack Springs Road

City Atmore State AL Zip Code 36502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11ai-000036871**

Amount of Each Receipt this Period  
 1000.00

**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

**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

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

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

1000.00

41175.00

**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 24 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Association of Nurse Anesthetists PAC (CRNA PAC)**

Mailing Address 412 First Street SE #12

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11c-000036738**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Glover Park PAC**

Mailing Address 700 13th Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00466094

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 18 / 2014

**Transaction ID : 11c-000036739**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Corning Incorporated Employees PAC (COREPAC)**

Mailing Address 325 7th Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033589

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036742**

Amount of Each Receipt this Period  
5000.00

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

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

8500.00



**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 25 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**National Association of Health Underwriters (NAHU) PAC (HUPAC)**

Mailing Address 1212 New York Avenue NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036746**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Verizon Communications Inc Good Government Club**

Mailing Address 1300 I Street NW 4th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036748**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC (AMPAC)**

Mailing Address 25 Massachusetts Avenue NW Suite 6

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036741**

Amount of Each Receipt this Period  
2500.00

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

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

8500.00

**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 26 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Philips Electronics North America Corp PAC**

Mailing Address 1050 K Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00239780

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036747**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC**

Mailing Address 1120 Connecticut Avenue NW Suite 6

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036740**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Cox Enterprises PAC (COXPAC) Inc**

Mailing Address 975 F Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00477653

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036743**

Amount of Each Receipt this Period  
1500.00

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

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

3500.00

**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 27 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Google NetPAC**

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036745**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**DCI PAC**

Mailing Address 1828 L Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00412395

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : 11c-000036744**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**International Union of Operating Engineers PEC (EPEC)**

Mailing Address 1125 Seventeenth Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11c-000036799**

Amount of Each Receipt this Period  
500.00

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

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

3500.00

**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 28 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Akin Gump Strauss Hauer & Feld Civic Action Committee (AGSH&F PAC)**

Mailing Address 1333 New Hampshire Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : 11c-000036797**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : 11c-000036827**

Amount of Each Receipt this Period  
 3025.00

**[MEMO ITEM]**  
 Conduit Contributions Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**Council for Responsible Nutrition PAC (CRN PAC)**

Mailing Address 1828 L Street NW Suite 510

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00399659

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : 11c-000036798**

Amount of Each Receipt this Period  
 1000.00

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

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

1750.00

**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 29 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A. Novartis PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 Pennsylvania Avenue NW Suite 7  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C C00033969**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : 11c-000036800**  
 Amount of Each Receipt this Period  
 1000.00  
 5000.00

**B. The GlaxoSmithKline PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Five Moore Drive  
 City Research Triangle State NC Zip Code 27709  
 FEC ID number of contributing federal political committee. **C C00199703**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : 11c-000036803**  
 Amount of Each Receipt this Period  
 1000.00  
 5000.00

**C. Physical Therapy PAC (PT-PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111 North Fairfax Street  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C C00012880**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : 11c-000036802**  
 Amount of Each Receipt this Period  
 1000.00  
 7000.00

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

3000.00

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

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

FOR LINE NUMBER: PAGE 30 OF 88  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**College of American Pathologists PAC (PathPAC)**

Mailing Address 1350 I Street NW Suite 590

City Washington State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C C00274944**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : 11c-000036801**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**The NEA Fund for Children & Public Education PAC**

Mailing Address 1201 16th Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : 11c-000036804**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Association of Broadcasters PAC (NABPAC)**

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 9250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 11c-000036826**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

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

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

\_\_\_\_\_ 4500.00

\_\_\_\_\_

**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 31 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Oral & Maxillofacial Surgery PAC (OMSPAC)**

Mailing Address 9700 West Bryn Mawr Avenue

City Rosemont State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 11c-000036819**

Amount of Each Receipt this Period  
 4000.00

**B.** Full Name (Last, First, Middle Initial)  
**Oral & Maxillofacial Surgery PAC (OMSPAC)**

Mailing Address 9700 West Bryn Mawr Avenue

City Rosemont State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 11c-000036820**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 82074.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2014

**Transaction ID : 11c-000036828**

Amount of Each Receipt this Period  
 1525.00

**[MEMO ITEM]**  
 Conduit Contributions Through ActBlue

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

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

9000.00

**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)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bricklayers & Allied Craftworkers PAC**

Mailing Address 1776 Eye Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00003632

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036814**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Novo Nordisk Inc PAC**

Mailing Address 1155 F Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00424838

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036818**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**United Auto Workers (UAW) V CAP**

Mailing Address 8000 East Jefferson Avenue

City Detroit State MI Zip Code 48214-3963

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036821**

Amount of Each Receipt this Period  
 2500.00

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

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

7500.00



**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 33 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBCUniversal PAC**

Mailing Address 1701 JFK Boulevard

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036815**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Inc Federal PAC**

Mailing Address 208 South Akard Street

City Dallas State TX Zip Code 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036813**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**DRIVE Committee**

Mailing Address 25 Louisiana Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036816**

Amount of Each Receipt this Period  
5000.00

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

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

8500.00

**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 34 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**International Association of Fire Fighters (FIREPAC)**

Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : 11c-000036817**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
82149.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2014

**Transaction ID : 11c-000036882**

Amount of Each Receipt this Period  
75.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 325 Seventh Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2014

**Transaction ID : 11c-000036823**

Amount of Each Receipt this Period  
2000.00

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

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

3000.00

**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 35 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Pallone for Congress**

**A. American Podiatric Medical Association PAC (APMA PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 9312 Old Georgetown Road

City State Zip Code  
Bethesda MD 20814-1621

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : 11c-000036824**

Amount of Each Receipt this Period  
2500.00

**B. Bayer Corporation (BAYPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 Bayer Road

City State Zip Code  
Pittsburgh PA 15205

FEC ID number of contributing federal political committee. **C C00281162**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : 11c-000036825**

Amount of Each Receipt this Period  
1000.00

**C. AFSCME People PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1625 L Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2014

**Transaction ID : 11c-000036822**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

**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 36 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ActBlue**

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
83174.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 15 / 2014

**Transaction ID : 11c-000036883**

Amount of Each Receipt this Period  
1025.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
83224.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2014

**Transaction ID : 11c-000036884**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**American Academy of Ophthalmology Inc PAC (OPHTHPAC)**

Mailing Address 655 Beach Street

City State Zip Code  
San Francisco CA 94120

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : 11c-000036879**

Amount of Each Receipt this Period  
2500.00

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

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

2500.00

**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 37 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**CTIA PAC**

Mailing Address 1400 16th Street NW #600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00262295

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036876**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
83949.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036926**

Amount of Each Receipt this Period  
725.00

**[MEMO ITEM]**  
Conduit Contributions Through ActBlue

**C.** Full Name (Last, First, Middle Initial)  
**American Association of Nurse Anesthetists PAC (CRNA PAC)**

Mailing Address 412 First Street SE #12

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036874**

Amount of Each Receipt this Period  
2500.00

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

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

3500.00

**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 38 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Siemens Corporation PAC**

Mailing Address 300 New Jersey Avenue NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00353797**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036880**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**National Cable & Telecommunications Association PAC (NCTAPAC)**

Mailing Address 25 Massachusetts Avenue NW Suite 1

City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C C00010082**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036878**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**United Technologies Corporation PAC (UTC PAC)**

Mailing Address 1101 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036881**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

**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 39 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**International Fragrance Association (IFRA) North America PAC (ScentPAC)**

Mailing Address 1655 North Fort Myer Drive

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00540740

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036877**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Bart Gordon Committee**

Mailing Address 2442 Belmont Road NW

City State Zip Code  
Washington DC 20008

FEC ID number of contributing federal political committee. **C** C00196915

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036872**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Alkermes Inc PAC**

Mailing Address 852 Winter Street

City State Zip Code  
Waltham MA 02451

FEC ID number of contributing federal political committee. **C** C00525063

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036873**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

**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 40 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Baker Donelson Bearman Caldwell & Berkowitz PC PAC**

Mailing Address 920 Massachusetts Avenue

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00431072

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 11c-000036875**

Amount of Each Receipt this Period  
 1000.00

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

82750.00



**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 41 OF 88
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Pallone for Senate**

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C** C00545905

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
654337.75

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 12-03-10755-14443**

Amount of Each Receipt this Period  
20000.00

Transfer - Surplus Campaign Funds

**B.** Full Name (Last, First, Middle Initial)  
**Pallone for Senate**

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C** C00545905

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
679337.75

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 12-03-10755-14442**

Amount of Each Receipt this Period  
25000.00

Transfer - Surplus Campaign Funds

**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

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

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

45000.00

45000.00

**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 42 OF 88
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bank of America**

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1016.90

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : 15-03-10790-14561**

Amount of Each Receipt this Period  
3.00

Interest

**B.** Full Name (Last, First, Middle Initial)  
**Bank of America**

Mailing Address 577 Broadway

City Long Branch State NJ Zip Code 07740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1019.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : 15-03-10791-14562**

Amount of Each Receipt this Period  
2.30

Interest

**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

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

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

5.30

5.30

**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 43 OF 88			
	<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)  
**Pallone for Congress**

**A. ADP Payroll Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 1125 Virginia Drive

City Fort Washington State PA Zip Code 19034

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2014

Amount of Each Disbursement this Period: 1533.94

Transaction ID : 17-03-10611-14220

**B. Jeffrey C Carroll**

Full Name (Last, First, Middle Initial)  
Mailing Address 1831 Grampion Place

City Vienna State VA Zip Code 22182

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2014

Amount of Each Disbursement this Period: 136.17

Transaction ID : 17-03-10612-14221

**C. Janice Fuller**

Full Name (Last, First, Middle Initial)  
Mailing Address 7 Carbury Road

City Ocean State NJ Zip Code 07712

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2014

Amount of Each Disbursement this Period: 135.54

Transaction ID : 17-03-10613-14222

**SUBTOTAL** of Disbursements This Page (optional) ..... 1805.65

**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 44 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew B. Montekio</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 8 Hemlock Court		Amount of Each Disbursement this Period 2457.82 <b>Transaction ID : 17-03-10614-14223</b>
City Hamilton	State NJ	
Zip Code 08619	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Berger Hirschberg Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1010 Vernon Avenue NW Suite 814		Amount of Each Disbursement this Period 3655.87 <b>Transaction ID : 17-03-10714-14401</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Fundraising Consulting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Berger Hirschberg Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1010 Vernon Avenue NW Suite 814		Amount of Each Disbursement this Period 3662.42 <b>Transaction ID : 17-03-10715-14402</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Fundraising Consulting Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9776.11
<b>TOTAL</b> 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 45 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 13544.80
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement See Memo Items	Transaction ID : 17-03-10759-0000
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP VAN Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 6900.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Database Services	Transaction ID : 17-03-10759-14486
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Westin-Washington DC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 2350 M Street NW		Amount of Each Disbursement this Period 1509.08
City Washington	State DC	
Zip Code 20037	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10759-14484
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13544.80
<b>TOTAL</b> 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 46 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 590 Broadway		Amount of Each Disbursement this Period 35.44
City Long Branch	State NJ Zip Code 07740	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10759-14483
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Avis Car Rental - Tampa</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 4030 George J Bean Parkway		Amount of Each Disbursement this Period 288.44
City Tampa	State FL Zip Code 33607	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10759-14482
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 590 Broadway		Amount of Each Disbursement this Period 21.05
City Long Branch	State NJ Zip Code 07740	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10759-14478
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 47 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. La Quinta Inn - Plantation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 8101 Peters Road		Amount of Each Disbursement this Period 109.89
City Plantation	State FL	
Purpose of Disbursement Travel Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 27-01 Queens Plaza North		Amount of Each Disbursement this Period 234.00
City Long Island City	State NY	
Purpose of Disbursement Travel Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 27-01 Queens Plaza North		Amount of Each Disbursement this Period 359.00
City Long Island City	State NY	
Purpose of Disbursement Travel Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> 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 48 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 111 West Rio Salado Parkway		Amount of Each Disbursement this Period 149.00
City Tempe	State AZ	Zip Code 85281
Purpose of Disbursement Travel Expense	Category/ Type	
Candidate Name	Transaction ID : 17-03-10759-14491	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>B. Carmine's</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 425 7th Street NW		Amount of Each Disbursement this Period 364.00
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Food & Beverage	Category/ Type	
Candidate Name	Transaction ID : 17-03-10759-14470	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 47.34
City South Amboy	State NJ	Zip Code 08879
Purpose of Disbursement Travel Expense	Category/ Type	
Candidate Name	Transaction ID : 17-03-10759-14497	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 49 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 111 West Rio Salado Parkway		Amount of Each Disbursement this Period 149.00
City Tempe	State AZ	
Zip Code 85281	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14490 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 63.45
City South Amboy	State NJ	
Zip Code 08879	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14464 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 590 Broadway		Amount of Each Disbursement this Period 45.41
City Long Branch	State NJ	
Zip Code 07740	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14459 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 50 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. 12 West 48th Street Parking</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 12 West 48th Street		Amount of Each Disbursement this Period 27.00
City New York	State NY	
Zip Code 10036	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14463
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. La Quinta Inn &amp; Suites</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 2620 North 26th Avenue		Amount of Each Disbursement this Period 113.22
City Hollywood	State FL	
Zip Code 33020	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14475
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 62.53
City South Amboy	State NJ	
Zip Code 08879	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10759-14466
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 51 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 68.72
City South Amboy	State NJ Zip Code 08879	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10759-14468
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Lavagna</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 539 Eight Street SE		Amount of Each Disbursement this Period 880.41
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Food & Beverage	Candidate Name	Transaction ID : 17-03-10759-14471
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 558.81
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Service Charge	Candidate Name	Transaction ID : 17-03-10759-14498
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 52 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Jersey E-Z Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 375 McCarter Highway		Amount of Each Disbursement this Period 115.00
City Newark	State NJ Zip Code 07714	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10759-14462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address PO Box 69		Amount of Each Disbursement this Period 589.40
City Newark	State NJ Zip Code 07101-0069	
Purpose of Disbursement Internet Services	Candidate Name	Transaction ID : 17-03-10709-14396
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address PO Box 408		Amount of Each Disbursement this Period 182.35
City Newark	State NJ Zip Code 07101-0408	
Purpose of Disbursement Telecommunications Services	Candidate Name	Transaction ID : 17-03-10710-14397
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	771.75
<b>TOTAL</b> 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 53 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ally Financial</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address PO Box 78252		Amount of Each Disbursement this Period 692.07 Transaction ID : 17-03-10712-14399
City Phoenix	State AZ	
Zip Code 85062-8252	Purpose of Disbursement Travel Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25 Transaction ID : 17-03-10787-14558
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Payroll Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Heritage Business Solutions Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2014
Mailing Address 1263 Glen Avenue		Amount of Each Disbursement this Period 43.06 Transaction ID : 17-03-10713-14400
City Moorestown	State NJ	
Zip Code 08057	Purpose of Disbursement Office Equipment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	692.07
<b>TOTAL</b> 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 54 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Horizon Blue Cross/Blue Shield of New Jersey</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO Box 1738		Amount of Each Disbursement this Period 1699.04 <b>Transaction ID : 17-03-10720-14407</b>
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Insurance	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Davey Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 236 Massachusetts Avenue NE Suite 603		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : 17-03-10717-14404</b>
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Fundraising Consulting Services	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jodi Woolley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address PO Box 4088		Amount of Each Disbursement this Period 2900.00 <b>Transaction ID : 17-03-10719-14406</b>
City Long Branch	State NJ Zip Code 07740	
Purpose of Disbursement Rent	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7599.04
<b>TOTAL</b> 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 55 OF 88			
	<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)  
**Pallone for Congress**

**A. ADP Payroll Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 1125 Virginia Drive

City Fort Washington State PA Zip Code 19034

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2014

Amount of Each Disbursement this Period: 1478.82

Transaction ID : 17-03-10662-14337

**B. Jeffrey C Carroll**

Full Name (Last, First, Middle Initial)  
Mailing Address 1831 Grampion Place

City Vienna State VA Zip Code 22182

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2014

Amount of Each Disbursement this Period: 136.17

Transaction ID : 17-03-10663-14338

**c. Janice Fuller**

Full Name (Last, First, Middle Initial)  
Mailing Address 7 Carbury Road

City Ocean State NJ Zip Code 07712

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 30 / 2014

Amount of Each Disbursement this Period: 135.54

Transaction ID : 17-03-10664-14339

**SUBTOTAL** of Disbursements This Page (optional) ..... 1750.54

**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 56 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Matthew B. Montekio</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014		
Mailing Address 8 Hemlock Court			Amount of Each Disbursement this Period 2480.44		
City Hamilton	State NJ	Zip Code 08619	Transaction ID : 17-03-10665-14340		
Purpose of Disbursement Salary		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014		
Mailing Address 14 Arrow Street			Amount of Each Disbursement this Period 119.49		
City Cambridge	State MA	Zip Code 02138	Transaction ID : 17-03-10670-14349		
Purpose of Disbursement Service Fee		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. De Lage Landen</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014		
Mailing Address PO Box 41602			Amount of Each Disbursement this Period 235.70		
City Philadelphia	State PA	Zip Code 19101-1602	Transaction ID : 17-03-10723-14410		
Purpose of Disbursement Equipment Rental		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2835.63
<b>TOTAL</b> 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 57 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Konica Business Technology</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address Dept AT 952823		Amount of Each Disbursement this Period 555.11 <b>Transaction ID : 17-03-10724-14411</b>
City Atlanta	State GA Zip Code 31192-2823	
Purpose of Disbursement Equipment Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25 <b>Transaction ID : 17-03-10788-14559</b>
City Fort Washington	State PA Zip Code 19034	
Purpose of Disbursement Payroll Processing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Progressive</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address National Continental Insurance Com Box 30108		Amount of Each Disbursement this Period 4496.00 <b>Transaction ID : 17-03-10730-14417</b>
City Tampa	State FL Zip Code 33630	
Purpose of Disbursement Insurance	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5133.36
<b>TOTAL</b> 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 58 OF 88	
	<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)  
**Pallone for Congress**

**A. Common Sense Consulting**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 21

City Hopewell State NJ Zip Code 08525

Purpose of Disbursement Compliance Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 11 / 2014

Amount of Each Disbursement this Period: 4500.00

Transaction ID : 17-03-10735-14422

March

**B. ADP Payroll Services**

Full Name (Last, First, Middle Initial)  
Mailing Address 1125 Virginia Drive

City Fort Washington State PA Zip Code 19034

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2014

Amount of Each Disbursement this Period: 2259.81

Transaction ID : 17-03-10671-14352

**c. Jeffrey C Carroll**

Full Name (Last, First, Middle Initial)  
Mailing Address 1831 Grampion Place

City Vienna State VA Zip Code 22182

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 13 / 2014

Amount of Each Disbursement this Period: 136.16

Transaction ID : 17-03-10672-14353

**SUBTOTAL** of Disbursements This Page (optional) ..... 6895.97

**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 59 OF 88			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Janice Fuller</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 7 Carbury Road		Amount of Each Disbursement this Period 135.53 <b>Transaction ID : 17-03-10673-14354</b>
City Ocean	State NJ	
Zip Code 07712	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Matthew B. Montekio</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 8 Hemlock Court		Amount of Each Disbursement this Period 2480.45 <b>Transaction ID : 17-03-10674-14355</b>
City Hamilton	State NJ	
Zip Code 08619	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Adam Erickson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 54 Hassart Street		Amount of Each Disbursement this Period 1546.96 <b>Transaction ID : 17-03-10675-14356</b>
City New Brunswick	State NJ	
Zip Code 08901	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4162.96
<b>TOTAL</b> 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 60 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 60.24 <b>Transaction ID : 17-03-10682-14363</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NJ Motor Vehicle Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 009		Amount of Each Disbursement this Period 71.50 <b>Transaction ID : 17-03-10736-14423</b>
City Trenton	State NJ	
Zip Code 08646	Purpose of Disbursement Travel Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address PO Box 69		Amount of Each Disbursement this Period 589.40 <b>Transaction ID : 17-03-10747-14434</b>
City Newark	State NJ	
Zip Code 07101-0069	Purpose of Disbursement Internet Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	721.14
<b>TOTAL</b> 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 61 OF 88			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 200 Broadway		Amount of Each Disbursement this Period 50.91
City Long Branch	State NJ	
Zip Code 07740	Purpose of Disbursement Delivery Services	Transaction ID : 17-03-10743-14430
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ivonne Fernandez</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 57-A White Street		Amount of Each Disbursement this Period 1100.00
City Eatontown	State NJ	
Zip Code 07724	Purpose of Disbursement Office Services - Facilities Maintenance	Transaction ID : 17-03-10744-14431
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Royal Printing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO Box 1000		Amount of Each Disbursement this Period 208.65
City West New York	State NJ	
Zip Code 07093	Purpose of Disbursement Printing Services	Transaction ID : 17-03-10746-14433
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1359.65
<b>TOTAL</b> 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 62 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)  
**A. Verizon Wireless**

Mailing Address PO Box 408

City Newark State NJ Zip Code 07101-0408

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 203.72

Transaction ID : 17-03-10748-14435

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Horizon Blue Cross/Blue Shield of New Jersey**

Mailing Address PO Box 1738

City Newark State NJ Zip Code 07101

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 2327.95

Transaction ID : 17-03-10749-14436

Category/Type

Full Name (Last, First, Middle Initial)  
**C. American Express**

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement See Memo Items

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 4710.65

Transaction ID : 17-03-10760-0000

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 7242.32

**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 63 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunoco</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 943 US Route 9 North		Amount of Each Disbursement this Period 49.46
City South Amboy	State NJ	
Zip Code 08879	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14529
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Avis Rent A Car</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1200 State Highway 34		Amount of Each Disbursement this Period 1.75
City Matawan	State NJ	
Zip Code 07747	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14519
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rosa Mexicano Restaurant</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 575 7th Street at F Street NW		Amount of Each Disbursement this Period 540.37
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10760-14518
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 64 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Lavagna</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 539 Eight Street SE		Amount of Each Disbursement this Period 650.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food & Beverage	Transaction ID : 17-03-10760-14514
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheraton - Atlantic City Convention Center</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 2 Miss America Way		Amount of Each Disbursement this Period 158.76
City Atlantic City	State NJ	
Zip Code 08401	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14526
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Avis Rent A Car</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 1200 State Highway 34		Amount of Each Disbursement this Period 15.95
City Matawan	State NJ	
Zip Code 07747	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14516
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 65 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)  
**A. Corner Bakery**

Mailing Address 12700 Park Central Drive

City Dallas State TX Zip Code 75251

Purpose of Disbursement Food & Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 198.00

Transaction ID : 17-03-10760-14515

[MEMO ITEM]

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

Mailing Address 539 Eight Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Food & Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 495.80

Transaction ID : 17-03-10760-14517

[MEMO ITEM]

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

Mailing Address 570 Joline Avenue

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 58.10

Transaction ID : 17-03-10760-14503

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 66 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Jersey E-Z Pass</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 375 McCarter Highway		Amount of Each Disbursement this Period 170.00
City Newark	State NJ Zip Code 07714	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10760-14511
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Hess Station</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address Route 36		Amount of Each Disbursement this Period 63.21
City Eatontown	State NJ Zip Code 07724	
Purpose of Disbursement Travel Expense	Candidate Name	Transaction ID : 17-03-10760-14512
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Carmine's</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 425 7th Street NW		Amount of Each Disbursement this Period 459.17
City Washington	State DC Zip Code 20004	
Purpose of Disbursement Food & Beverage	Candidate Name	Transaction ID : 17-03-10760-14513
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 67 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 444.81
City Newark	State NJ Zip Code 07101	
Purpose of Disbursement Service Charge	Category/Type	Transaction ID : 17-03-10760-14531 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 590 Broadway		Amount of Each Disbursement this Period 61.28
City Long Branch	State NJ Zip Code 07740	
Purpose of Disbursement Travel Expense	Category/Type	Transaction ID : 17-03-10760-14507 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ExxonMobil</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 590 Broadway		Amount of Each Disbursement this Period 54.00
City Long Branch	State NJ Zip Code 07740	
Purpose of Disbursement Travel Expense	Category/Type	Transaction ID : 17-03-10760-14505 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 68 OF 88	
	<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)  
**Pallone for Congress**

**A. Watchung Spring Water**

Full Name (Last, First, Middle Initial)  
Mailing Address 1900 Swarthmore Avenue

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 33.97

Transaction ID : 17-03-10760-14504

[MEMO ITEM]

**B. Foggia Florist**

Full Name (Last, First, Middle Initial)  
Mailing Address 196 Monmouth Boulevard

City Oceanport State NJ Zip Code 07757

Purpose of Disbursement Office Expense - Flowers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 122.00

Transaction ID : 17-03-10760-14522

[MEMO ITEM]

**C. Sunoco**

Full Name (Last, First, Middle Initial)  
Mailing Address 943 US Route 9 North

City South Amboy State NJ Zip Code 08879

Purpose of Disbursement Travel Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 16 / 2014

Amount of Each Disbursement this Period: 62.18

Transaction ID : 17-03-10760-14501

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**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 69 OF 88	
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. New Jersey E-Z Pass</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 375 McCarter Highway		Amount of Each Disbursement this Period 115.00
City Newark	State NJ	
Zip Code 07714	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14500
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jiffy Lube</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 210 Highway 36		Amount of Each Disbursement this Period 93.06
City West Long Branch	State NJ	
Zip Code 07764	Purpose of Disbursement Travel Expense	Transaction ID : 17-03-10760-14523
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. ADP Payroll Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1125 Virginia Drive		Amount of Each Disbursement this Period 82.25
City Fort Washington	State PA	
Zip Code 19034	Purpose of Disbursement Payroll Processing	Transaction ID : 17-03-10789-14560
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.25
<b>TOTAL</b> 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 70 OF 88			
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 2.97
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10695-14376
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 40.49
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10695-14381
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 1.98
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10695-14382
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.44
<b>TOTAL</b> 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 71 OF 88		
	<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)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 14 Arrow Street		Amount of Each Disbursement this Period 28.64
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Service Fee	Transaction ID : 17-03-10758-14450
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
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)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
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)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	28.64
<b>TOTAL</b> This Period (last page this line number only).....	64447.20

**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 72 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial)  
**A. BAC Local 5 Charitable Activities Account**

Mailing Address 3281 Route 206

City Bordentown State NJ Zip Code 08505

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 21 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : 21-03-10706-14393

Full Name (Last, First, Middle Initial)  
**B. Middlesex County Building & Construction Trades Council**

Mailing Address 44 North Main Street

City Milltown State NJ Zip Code 08850

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 21 / 2014

Amount of Each Disbursement this Period: 275.00

Transaction ID : 21-03-10707-14394

Full Name (Last, First, Middle Initial)  
**C. New Leaders Council**

Mailing Address 4005 Wisconsin Avenue NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 22 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : 21-03-10708-14395

**SUBTOTAL** of Disbursements This Page (optional) ..... 1075.00

**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 73 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. South Amboy Democratic Organization</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 269 Second Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 21-03-10725-14412</b>
City South Amboy	State NJ	
Zip Code 08879-1632	Purpose of Disbursement Contribution - Non-Federal	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. New Jersey Democratic State Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 196 West State Street		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : 21-03-10726-14413</b>
City Trenton	State NJ	
Zip Code 08608	Purpose of Disbursement Transfer	Category/ Type
Candidate Name <b>New Jersey Democratic State Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Democratic Majority PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 3037		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : 21-03-10733-14420</b>
City Long Branch	State NJ	
Zip Code 07740	Purpose of Disbursement Contribution - Non-Federal	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7300.00
<b>TOTAL</b> 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 74 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Rick Kessler</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 18 / 2014</b>
Mailing Address <b>1620 Belvedere Boulevard</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>21-03-10785-14556</b>
City <b>Silver Spring</b> State <b>MD</b> Zip Code <b>20902</b>	Purpose of Disbursement <b>Contribution - Non-Federal</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Donna Christensen for Governor</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 19 / 2014</b>
Mailing Address <b>1 B Gasvaerks Gade</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>21-03-10781-14552</b>
City <b>St. Thomas</b> State <b>VI</b> Zip Code <b>00802</b>	Purpose of Disbursement <b>Contribution - Non-Federal</b>	
Candidate Name <b>Donna Christensen for Governor</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Trivedi for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2014</b>
Mailing Address <b>PO Box 534</b>		Amount of Each Disbursement this Period <b>2000.00</b> Transaction ID : <b>21-03-10751-14438</b>
City <b>West Chester</b> State <b>PA</b> Zip Code <b>19381</b>	Purpose of Disbursement <b>Contribution</b>	
Candidate Name <b>Manan Trivedi</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>PA</b> District: <b>06</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4000.00</b>
<b>TOTAL</b> 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 75 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Dan Maffei</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 230		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10774-14545</b>
City Syracuse	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Daniel Benjamin Maffei</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 24		

Full Name (Last, First, Middle Initial) <b>B. Friends of Elizabeth Esty</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 61		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10772-14543</b>
City Cheshire	State CT	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Elizabeth Esty</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CT District: 05		

Full Name (Last, First, Middle Initial) <b>c. Kuster for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address PO Box 1498		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10773-14544</b>
City Concord	State NH	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Ann Mclane Kuster</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH District: 02		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3000.00
<b>TOTAL</b> 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 76 OF 88
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sean Patrick Maloney for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 270		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10775-14546</b>
City Newburgh	State NY	
Zip Code 12550	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Sean Patrick Maloney</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 18	

Full Name (Last, First, Middle Initial) <b>B. Belgard for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address PO Box 35		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10770-14541</b>
City Willingboro	State NJ	
Zip Code 08046	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Aimee Belgard</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NJ District: 03	

Full Name (Last, First, Middle Initial) <b>c. Montanans for Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 1916		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10696-14383</b>
City Billings	State MT	
Zip Code 59103	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>John Lewis</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MT District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> 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 77 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patrick Henry Hays</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 94886		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10697-14384</b>
City North Little Rock	State AR	
Zip Code 72190	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Patrick Henry Hays</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR	District: 02	

Full Name (Last, First, Middle Initial) <b>B. Appel for Iowa</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 702		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10698-14385</b>
City Des Moines	State IA	
Zip Code 50303	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Staci Appel</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Pam Byrnes for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 485		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10699-14386</b>
City Dexter	State MI	
Zip Code 48130	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Pam Byrnes</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 78 OF 88
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Romanoff for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 783		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10700-14387</b>
City Aurora	State CO	
Zip Code 80040		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name <b>Andrew Romanoff</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CO District: 06	

Full Name (Last, First, Middle Initial) <b>B. Erin Bilbray for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 9101 West Sahara Avenue		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10701-14388</b>
City Las Vegas	State NV	
Zip Code 89117		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name <b>Erin Bilbray</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NV District: 03	

Full Name (Last, First, Middle Initial) <b>c. Committee to Elect Martha Robertson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 54		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10702-14389</b>
City Dryden	State NY	
Zip Code 13053		Category/ Type
Purpose of Disbursement Contribution		
Candidate Name <b>Martha Robertson</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 23	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 79 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Recchia for Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 172 Gravesend Neck Road		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10704-14391</b>
City Brooklyn	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Domenic Recchia Jr.</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 11	

Full Name (Last, First, Middle Initial) <b>B. Recchia for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 172 Gravesend Neck Road		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10753-14440</b>
City Brooklyn	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Domenic Recchia Jr.</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 11	

Full Name (Last, First, Middle Initial) <b>c. Kathleen Rice for Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2014
Mailing Address 410 Jericho Turnpike Suite 200		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10705-14392</b>
City Jericho	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Kathleen Rice</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 80 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kathleen Rice for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 410 Jericho Turnpike Suite 200		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10754-14441</b>
City Jericho State NY Zip Code 11753	Purpose of Disbursement Contribution	
Candidate Name <b>Kathleen Rice</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 04		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Boyle</b>		Date of Disbursement MM / DD / YYYY 05 / 27 / 2014
Mailing Address PO Box 11545		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10716-14403</b>
City Philadelphia State PA Zip Code 19116	Purpose of Disbursement Contribution	
Candidate Name <b>Brendan Boyle</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2014 Primary - Debt
State: PA District: 13		

Full Name (Last, First, Middle Initial) <b>c. Aaron Woolf for Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address PO Box 248		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10718-14405</b>
City Elizabethtown State NY Zip Code 12932	Purpose of Disbursement Contribution	
Candidate Name <b>Aaron Woolf</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 21		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 81 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pat Murphy for Iowa</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 1101 Main Street		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10721-14408</b>
City Dubuque	State IA	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Patrick Joseph Murphy</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 01		

Full Name (Last, First, Middle Initial) <b>B. Pat Murphy for Iowa</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 1101 Main Street		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10786-14557</b>
City Dubuque	State IA	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Patrick Joseph Murphy</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 01		

Full Name (Last, First, Middle Initial) <b>c. Sean Eldridge for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address PO Box 4113		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10727-14414</b>
City Kingston	State NY	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Sean Eldridge</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 19		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 82 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bonnie Watson Coleman for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 180 Upland Avenue		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10728-14415</b>
City Ewing	State NJ Zip Code 08638	
Purpose of Disbursement Contribution	Category/Type	
Candidate Name <b>Bonnie Watson Coleman</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 12	

Full Name (Last, First, Middle Initial) <b>B. Cain for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 1523		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10739-14426</b>
City Bangor	State ME Zip Code 04402	
Purpose of Disbursement Contribution	Category/Type	
Candidate Name <b>Emily Ann Cain</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: ME District: 02	

Full Name (Last, First, Middle Initial) <b>c. Brad Ashford for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 24023		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10741-14428</b>
City Omaha	State NE Zip Code 68124	
Purpose of Disbursement Contribution	Category/Type	
Candidate Name <b>Brad Ashford</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 83 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pete Aguilar for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address PO Box 10954		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10742-14429</b>
City San Bernadino	State CA	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Pete Aguilar</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 31	

Full Name (Last, First, Middle Initial) <b>B. Nick Casey for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO Box 1311		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10750-14437</b>
City Charleston	State WV	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>George Nicholas Casey</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WV	District: 02	

Full Name (Last, First, Middle Initial) <b>c. James Lee Witt for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO Box 36		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10752-14439</b>
City Dardanelle	State AR	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>James Lee Witt</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AR	District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 84 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Committee to Re-Elect Loretta Sanchez</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 6037		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10762-14533</b>
City Santa Ana	State CA	
Zip Code 92706	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Loretta Sanchez</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 46	

Full Name (Last, First, Middle Initial) <b>B. Kurt Schrader for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 3314		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10763-14534</b>
City Oregon City	State OR	
Zip Code 97045	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Kurt Schrader</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) <b>c. Steve Cohen for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 349 Kenilworth Place		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10764-14535</b>
City Mephis	State TN	
Zip Code 38112	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Stephen Ira Cohen</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: TN	District: 09	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 85 OF 88			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Alma Adams for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO Box 20622		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10765-14536</b>
City Greensboro	State NC	
Zip Code 27420	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>Alma Shealey Adams</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NC	District: 12	

Full Name (Last, First, Middle Initial) <b>B. Friends of Don Beyer</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 1751 Potomac Greens Dr.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10767-14538</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>Donald Beyer</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: VA	District: 08	

Full Name (Last, First, Middle Initial) <b>c. John Foust for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO Box 962		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10768-14539</b>
City McLean	State VA	
Zip Code 22101	Purpose of Disbursement Contribution	Category/Type
Candidate Name <b>John Foust</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: VA	District: 10	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 86 OF 88	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ted Deutch for Congress Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 1050 17th Street NW		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10769-14540</b>
City Washington State DC Zip Code 20036	Purpose of Disbursement Contribution	
Candidate Name <b>Theodore Eliot Deutch</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 21		

Full Name (Last, First, Middle Initial) <b>B. Gutierrez for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 5310 West Cullom Avenue		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10771-14542</b>
City Chicago State IL Zip Code 60641	Purpose of Disbursement Contribution	
Candidate Name <b>Luis Gutierrez</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 04		

Full Name (Last, First, Middle Initial) <b>c. Donald M Payne Jr for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO Box 2406		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10776-14547</b>
City Newark State NJ Zip Code 07114	Purpose of Disbursement Contribution	
Candidate Name <b>Donald M. Payne Jr.</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 10		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 87 OF 88
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mowrer for Iowa</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address PO Box 9		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10778-14549</b>
City Boone	State IA	
Zip Code 50036	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Jim Mowrer</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IA District: 04	

Full Name (Last, First, Middle Initial) <b>B. Kevin Strouse for Congress</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address PO Box 186		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10779-14550</b>
City Bensalem	State PA	
Zip Code 19020	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Kevin Strouse</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: PA District: 08	

Full Name (Last, First, Middle Initial) <b>c. Peters for Michigan</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address PO Box 226		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-03-10780-14551</b>
City Bloomfield Hills	State MI	
Zip Code 48303	Purpose of Disbursement Contribution	Category/ Type
Candidate Name <b>Gary Peters</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> 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 88 OF 88
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Pallone for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eggman for Congress 2014</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 3220 West Monte Vista Avenue		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10782-14553</b>
City Turlock State CA Zip Code 95380	Purpose of Disbursement Contribution	
Candidate Name <b>Michael Ray Eggman</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 10		

Full Name (Last, First, Middle Initial) <b>B. Quigley for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address PO Box 13040		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10783-14554</b>
City Chicago State IL Zip Code 60613	Purpose of Disbursement Contribution	
Candidate Name <b>Mike Quigley</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL District: 05		

Full Name (Last, First, Middle Initial) <b>c. Debbie Dingell for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address PO Box 746		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 21-03-10784-14555</b>
City Deerborn State MI Zip Code 48121	Purpose of Disbursement Contribution	
Candidate Name <b>Debbie Dingell</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 12		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	91375.00