


<b>RECEIPTS AND EXPENDITURES QUARTERLY REPORT</b>		<b>FOR STATE USE ONLY</b>
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P.O. Box 185, Trenton, NJ 08625-0185		
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site: <a href="http://www.elec.state.nj.us/">http://www.elec.state.nj.us/</a>		
COMMITTEE NAME OR APPROVED ACRONYM <i>Belmar Democratic Committee</i>		
ADDRESS (number and street) <input type="checkbox"/> CHECK IF DIFFERENT THAN PREVIOUSLY REPORTED <i>1320 State Rd 71, Unit 107</i>		
CITY, STATE and ZIP CODE <i>Belmar, NJ 07719</i>		ELEC IDENTIFICATION NUMBER <i>H1307000311Q2009</i>
COMMITTEE TYPE <input checked="" type="checkbox"/> CPC <input type="checkbox"/> PPC <input type="checkbox"/> LLC	CHECK IF: <input type="checkbox"/> AMENDMENT <input type="checkbox"/> FIRST REPORT FILED	REPORT QUARTER <input type="checkbox"/> APR 15 <input type="checkbox"/> JUL 15 <input checked="" type="checkbox"/> OCT 15 <input type="checkbox"/> JAN 15 YEAR <i>2010</i>

Do not attempt to complete the "Depository Information" or the "Net Financial Summary" until the appropriate schedules have been completed.

DEPOSITORY INFORMATION		COLUMN A	COLUMN B
PERIOD COVERED	FROM	THROUGH	THIS REPORT
	<i>7/1/10</i>	<i>9/30/10</i>	CALENDAR YEAR-TO-DATE
1. CASH ON HAND, JANUARY 1, <i>2010</i>			<i>566.50</i>
2. CASH ON HAND, BEGINNING OF REPORTING PERIOD		<i>3,280.60</i>	
3. MONETARY RECEIPTS (+)		<i>1,500.00</i>	<i>6,750.00</i>
4. SUBTOTAL		<i>4,780.60</i>	<i>7,316.50</i>
5. MONETARY EXPENDITURES (-)		<i>4,598.50</i>	<i>7,134.40</i>
6. CASH ON HAND, CLOSE OF REPORTING PERIOD		<i>182.10</i>	<i>182.10</i>

NET FINANCIAL SUMMARY		
7. CASH ON HAND, CLOSE OF REPORTING PERIOD		<i>182.10</i>
8. DEBT OWED TO COMMITTEE (+)		<i>0</i>
9. SUBTOTAL		<i>182.10</i>
10. DEBT OWED BY COMMITTEE (-)		<i>0</i>
11. TOTAL (Net Worth)		<i>182.10</i>

TREASURER'S CERTIFICATION	
I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.	
<i>10/12/10</i> DATE <i>Conor Egan</i> PRINT NAME <i>1000 River Rd, 8L</i> ADDRESS <i>Belmar, NJ 07719</i>	 SIGNATURE <i>732-492-6506</i> *(AREA CODE) DAY TELEPHONE NUMBER <i>732-492-6506</i> *(AREA CODE) EVENING TELEPHONE NUMBER

Do not attempt to complete Tables I and II until the appropriate schedules have been completed.

TABLE I RECEIPTS		COLUMN A	COLUMN B
	MONETARY RECEIPTS	THIS REPORT	CALENDAR YEAR-TO-DATE
1.	CONTRIBUTIONS, \$300 OR LESS	200	5,350
2.	CONTRIBUTIONS, MORE THAN \$300	1,300	1,300
2a.	CURRENCY CONTRIBUTIONS	0	100
3.	TOTAL (Add lines 1, 2 and 2a)	1,500	6,750
4.	REFUND OF EXCESSIVE CONTRIBUTIONS (ADJUSTMENT SCHEDULE) (-)	0	0
5.	SUBTOTAL (Subtract line 4 from line 3)	1,500	6,750
OTHER RECEIPTS			
6.	REIMBURSEMENTS/REFUNDS	0	0
7.	DIVIDENDS/INTEREST	0	0
8.	LOANS RECEIVED BY COMMITTEE, \$300 OR LESS	0	0
9.	LOANS RECEIVED BY COMMITTEE MORE THAN \$300 AND ALL CURRENCY LOANS	0	0
10.	TOTAL MONETARY RECEIPTS (Add lines 5 through 9)	1,500	6,750
11.	IN-KIND CONTRIBUTIONS, \$300 OR LESS	23.90	134.42
12.	IN-KIND CONTRIBUTIONS, MORE THAN \$300	0	980
13.	GROSS RECEIPTS (Add lines 10, 11 and 12)	1,523.90	7,864.42
TABLE II EXPENDITURES			
14.	OPERATING DISBURSEMENTS	4,098.50	6,634.40
CONTRIBUTIONS (FROM THIS COMMITTEE) TO:			
15a.	NJ GUBERNATORIAL CANDIDATES/COMMITTEES	0	0
15b.	NJ LEGISLATIVE CANDIDATES/COMMITTEES	0	0
15c.	ALL OTHER CANDIDATES/COMMITTEES	500	500
EXPENDITURES MADE ON BEHALF OF:			
16a.	NJ GUBERNATORIAL CANDIDATES/COMMITTEES	0	0
16b.	NJ LEGISLATIVE CANDIDATES/COMMITTEES	0	0
16c.	ALL OTHER CANDIDATES/COMMITTEES	0	0
17.	LOAN PAYMENTS	0	0
18.	TOTAL MONETARY EXPENDITURES (Add lines 14 through 17)	4,598.50	7,134.40
19.	IN-KIND CONTRIBUTIONS, \$300 OR LESS	23.90	134.42
20.	IN-KIND CONTRIBUTIONS, MORE THAN \$300	0	980
21.	GROSS EXPENDITURES (Add lines 18 through 20)	4,622.40	8,248.82

## DEPOSITORY SUMMARY

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.

**COMMITTEE NAME:** Belmar Democratic Committee

### BANK ACCOUNT INFORMATION

1. NAME OF BANK Central Jersey Bank (AREA CODE) TELEPHONE NUMBER 732-280-5400

MAILING ADDRESS 611 Main Street

CITY, STATE, ZIP CODE Belmar, NJ 07719

ACCOUNT NAME Business Checking

OPENING BALANCE THIS PERIOD <u>3,280.60</u>	DEPOSITS THIS PERIOD <u>1,500.00</u>	DISBURSEMENTS THIS PERIOD <u>4,608.50</u>	CLOSING BALANCE THIS PERIOD <u>172.10</u>
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**If the committee has more than one bank account within the same bank, the name(s) of the additional account(s) must be provided.**

ACCOUNT NAME

OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD
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2. NAME OF BANK (AREA CODE) TELEPHONE NUMBER

MAILING ADDRESS

CITY, STATE, ZIP CODE

ACCOUNT NAME

OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD
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**If the committee has more than one bank account within the same bank, the name(s) of the additional account(s) must be provided.**

ACCOUNT NAME

OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD
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### OTHER ASSETS

**Other than the bank account(s) listed above, does this committee hold any of the following (please X):**

- |  |  |
|--|--|
| <input type="checkbox"/> Investment Institution Money Market Account | <input type="checkbox"/> Bonds         |
| <input type="checkbox"/> Certificate of Deposit (C.D.)               | <input type="checkbox"/> Stocks        |
| <input type="checkbox"/> Mutual Fund Account                         | <input type="checkbox"/> Real Property |
| <input type="checkbox"/> Other (please specify) _____                |  |

**For each item checked ("X") above (other than real property), please complete the following information. If real property is held, a Real Property Schedule must be filed as part of the Form R-3. Contact the Commission for a Real Property Schedule and instructions.**

1. NAME OF DEPOSITORY OR ISSUER (AREA CODE) TELEPHONE NUMBER

MAILING ADDRESS

CITY, STATE, ZIP CODE

ACCOUNT NAME

**TYPE OF ASSET**

MONEY MARKET     C.D.     MUTUAL FUND     BONDS     STOCKS     OTHER (specify) \_\_\_\_\_

VALUE OF ASSET AT PURCHASE IF APPLICABLE.

DATE OF MATURITY, IF APPLICABLE

OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD
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**ITEMIZED RECEIPTS (Other than Loans)**

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.

RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND FOR EACH SEPARATE ACCOUNT.)

CURRENCY

ALL OTHER MONETARY CONTRIBUTIONS

IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS

REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS

DIVIDENDS/ INTEREST

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME: Business Checking

CONTRIBUTOR NAME <u>Matthew Doherty</u>		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) <u>117 Inlet Tr</u>	
OCCUPATION <u>Financial Advisor</u>		STATE USE ONLY	(CITY, STATE AND ZIP CODE) <u>Belmar, NJ 07719</u>	
EMPLOYER NAME <u>Creative Financial Group</u>			DATE(S) RECEIVED THIS PERIOD <u>8/30/10</u>	AMOUNT(S) RECEIVED THIS PERIOD <u>\$500</u>
EMPLOYER ADDRESS (NUMBER AND STREET) <u>1305 Campus Pkwy #100</u>				
(CITY, STATE AND ZIP CODE) <u>Wall, NJ 07753</u>				
RECEIPT DESCRIPTION (if In-kind)		AGGREGATE YEAR-TO-DATE <u>500</u>		

CONTRIBUTOR NAME <u>Doug Deicke</u>		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) <u>1017 14th Ave</u>	
OCCUPATION <u>Retired</u>		STATE USE ONLY	(CITY, STATE AND ZIP CODE) <u>Belmar, NJ 07719</u>	
EMPLOYER NAME			DATE(S) RECEIVED THIS PERIOD <u>8/30/10</u>	AMOUNT(S) RECEIVED THIS PERIOD <u>\$500</u>
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (if In-kind)		AGGREGATE YEAR-TO-DATE <u>500</u>		

CONTRIBUTOR NAME <u>Victor Scudiero</u>		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) <u>1390 Hwy 36, Ste. 105</u>	
OCCUPATION <u>Not Provided</u>		STATE USE ONLY	(CITY, STATE AND ZIP CODE) <u>Hazlet, NJ 07730</u>	
EMPLOYER NAME <u>Not Provided</u>			DATE(S) RECEIVED THIS PERIOD <u>7/21/10</u>	AMOUNT(S) RECEIVED THIS PERIOD <u>\$300</u>
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (if In-kind)		AGGREGATE YEAR-TO-DATE <u>300</u>		

CONTRIBUTOR NAME		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)	
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE)	
EMPLOYER NAME			DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (if In-kind)		AGGREGATE YEAR-TO-DATE		

**1. SUBTOTAL (Add all receipts listed on this page.)** 1,300

**2. TOTAL RECEIPTS, THIS PERIOD (Complete this line on the last page used for each receipt type. Carry forward to applicable line on Page 2, Column A.)** 1,300

**ITEMIZED RECEIPTS (Other than Loans)**

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.

RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND FOR EACH SEPARATE ACCOUNT.)

CURRENCY   
  ALL OTHER MONETARY CONTRIBUTIONS   
  IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS   
  REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS   
  DIVIDENDS/ INTEREST

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME:

CONTRIBUTOR NAME <u>Concetta Gutierrez</u>	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) <u>306 14<sup>th</sup> Ave</u>
OCCUPATION <u>None</u>	STATE USE ONLY	(CITY, STATE AND ZIP CODE) <u>Belmar, NJ 07719</u>
EMPLOYER NAME <u>None</u>		DATE(S) RECEIVED THIS PERIOD <u>7/1/10</u>
EMPLOYER ADDRESS (NUMBER AND STREET) <u>N/A</u>		AMOUNT(S) RECEIVED THIS PERIOD <u>\$23.90</u>
(CITY, STATE AND ZIP CODE) <u>N/A</u>		
RECEIPT DESCRIPTION (If In-kind) <u>Website Fees</u>	AGGREGATE YEAR-TO-DATE <u>23.90</u>	

CONTRIBUTOR NAME	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE)
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (If In-kind)	AGGREGATE YEAR-TO-DATE	

CONTRIBUTOR NAME	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE)
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (If In-kind)	AGGREGATE YEAR-TO-DATE	

CONTRIBUTOR NAME	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE)
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (If In-kind)	AGGREGATE YEAR-TO-DATE	

**1. SUBTOTAL (Add all receipts listed on this page.)** 23.90

**2. TOTAL RECEIPTS, THIS PERIOD (Complete this line on the last page used for each receipt type. Carry forward to applicable line on Page 2, Column A.)** 23.90

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
USE A SEPARATE "SCHEDULE B" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME:

NAME AND ADDRESS OF LENDER	ORIGINAL LOAN AMOUNT	NEW LOANS THIS PERIOD	TOTAL AMOUNT OF LOAN PLUS INTEREST	OUTSTANDING BALANCE THIS PERIOD
PAYMENTS THIS PERIOD:		AMOUNT	CHECK NO(S).	DATE(S)

OCCUPATION	TERMS:	DATE INCURRED	DATE DUE	ANNUAL INTEREST RATE
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EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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1) NAME AND ADDRESS OF GUARANTOR	AMOUNT OUTSTANDING
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OCCUPATION	EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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2) NAME AND ADDRESS OF GUARANTOR	AMOUNT OUTSTANDING
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OCCUPATION	EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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NAME AND ADDRESS OF LENDER	ORIGINAL LOAN AMOUNT	NEW LOANS THIS PERIOD	TOTAL AMOUNT OF LOAN PLUS INTEREST	OUTSTANDING BALANCE THIS PERIOD
PAYMENTS THIS PERIOD:		AMOUNT	CHECK NO(S).	DATE(S)

OCCUPATION	TERMS:	DATE INCURRED	DATE DUE	ANNUAL INTEREST RATE
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EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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1) NAME AND ADDRESS OF GUARANTOR	AMOUNT OUTSTANDING
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OCCUPATION	EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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2) NAME AND ADDRESS OF GUARANTOR	AMOUNT OUTSTANDING
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OCCUPATION	EMPLOYER NAME AND ADDRESS (NUMBER, STREET, CITY, STATE AND ZIP CODE)	AGGREGATE YEAR-TO-DATE
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1. TOTAL NEW LOANS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 9, Column A.)	0
2. TOTAL AMOUNT OF LOANS PLUS INTEREST, THIS PERIOD	0
3. TOTAL LOAN PAYMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 17, Column A.)	0
4. TOTAL OF ALL OUTSTANDING LOANS PLUS INTEREST (Complete this line on the last page used. Carry back to Page 10, "Schedule F," Line 1.)	0



**ITEMIZED OPERATING DISBURSEMENTS**

SCHEDULE C

Page No. 8 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME: Business Checking

PAYEE OR CREDITOR NAME, ADDRESS (Number and Street, City, State, Zip Code)	PURPOSE*	AMOUNT(S) DISBURSED THIS PERIOD	TRANS- ACTION DATE(S)	CHECK NO(S).
* Legislative Leadership Committees - See Instructions concerning permissible uses of funds.				
A+P, 2007 State R#35, Wall, NJ, 07719	Food for event	51.34	8/7/10	Debit
ACN Graphics, PO Box 1548 Wall, NJ, 07719	Printing	775.75	9/3/10	1014
Ahern Printing, 231 Hwy 71, Manasquan, NJ 08736	Printing	172.50	9/1/10	Debit
Belmar Chamber of Commerce 1005 1/2 Main St, #2, Belmar, NJ 07719	Fee for Fall Festival Event	100.00	9/13/10	1017
Borough of Belmar, 601 Main St, Belmar, NJ, 07719	Permit for Office	190.00	9/3/10	Cash
Budget Print, 122 Main St, Belmar, NJ 07719	Printing	47.08	8/27/10	Debit
Cody Assoc., 611 Main St, Ste E, Belmar, NJ, 07719	Rent	437.50	9/8/10	1016
Central Jersey Bank 611 Main St, Belmar, NJ, 07719	Bank Fee	10.00	9/30/10	Debit
Coast Star, 13 Broad St Manasquan, NJ 08736	Advertisement	80.90	9/17/10	Debit
Concetto Guitierrez 306 142 Ave, Belmar, NJ, 07719	Reimbursement for printing costs	118.77	9/7/10	1013
Connolly Station 711 Main St, Belmar, NJ, 07719	Lunch meeting	25.31	9/2/10	Debit
1. SUBTOTAL (Add all disbursements listed on this page.)		2,009.15		
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 14, Column A.)				

**ITEMIZED OPERATING DISBURSEMENTS**

SCHEDULE C

Page No. 9 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: *Belmar Democratic Committee*

ACCOUNT NAME: *Business Checking*

PAYEE OR CREDITOR NAME, ADDRESS (Number and Street, City, State, Zip Code)	PURPOSE*	AMOUNT(S) DISBURSED THIS PERIOD	TRANS- ACTION DATE(S)	CHECK NO(S).
* Legislative Leadership Committees - See Instructions concerning permissible uses of funds.				
<i>Constant Contact 1601 Trepelo Rd Waltham, MA 02451</i>	<i>Marketing</i>	<i>40.00</i>	<i>9/29/10</i>	<i>Debit</i>
<i>Dollar Discount 1925 State Rt-36 Wall, NJ 07719</i>	<i>Party Favors (Balloons)</i>	<i>19.39</i>	<i>9/10/10</i>	<i>Debit</i>
<i>Dunkin Donuts 1601 Ocean Ave Belmar, NJ 07719</i>	<i>Food for event</i>	<i>47.97</i>	<i>9/30/10</i>	<i>Debit</i>
<i>Hanley's Liquor 807 Main St Belmar, NJ 07719</i>	<i>Ice for event</i>	<i>10.50</i>	<i>9/20/10</i>	<i>Debit</i>
<i>Judy Young 303 9E Ave Belmar, NJ 07719</i>	<i>Reimbursement for food for event</i>	<i>81.97</i>	<i>9/17/10</i>	<i>1018</i>
<i>Matthew Doherty 17 Inlet TR Belmar, NJ 07719</i>	<i>Reimbursement for office supplies</i>	<i>110.20</i>	<i>9/28/10</i>	<i>1030</i>
<i>Monmouth County Dems 1350 State Rd 36 Hazlet, NJ 07730</i>	<i>Tickets to event</i>	<i>125.00</i>	<i>9/24/10</i>	<i>1021</i>
<i>Shell Oil 1601 St. Rt-35 Belmar, NJ 07719</i>	<i>Gas</i>	<i>10.00</i>	<i>9/6/10</i>	<i>Debit</i>
<i>Simply Flowers 1110 Main St, Belmar, NJ 07719</i>	<i>Flowers</i>	<i>40.66</i>	<i>8/13/10</i>	<i>Debit</i>
<i>Sovereign Bank 17 10E Ave Belmar, NJ 07719</i>	<i>ATM Fee</i>	<i>2.00</i>	<i>9/3/10</i>	<i>Debit</i>
<i>Staples 2145 State Rt-35 Sea Girt, NJ, 08750</i>	<i>Office + Printing Supplies</i>	<i>187.25, 388.44, 37.43</i>	<i>9/13/10 9/14/10 9/17/10</i>	<i>Debit</i>
1. SUBTOTAL (Add all disbursements listed on this page.)	<i>1,100.81</i>			
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 14, Column A.)				

**ITEMIZED OPERATING DISBURSEMENTS**

SCHEDULE C

Page No. 10 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
 USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: *Belmar Democratic Committee*

ACCOUNT NAME: *Business Checking*

PAYEE OR CREDITOR NAME, ADDRESS (Number and Street, City, State, Zip Code)	PURPOSE*	AMOUNT(S) DISBURSED THIS PERIOD	TRANS- ACTION DATE(S)	CHECK NO(S).
* Legislative Leadership Committees - See Instructions concerning permissible uses of funds.				
<i>Staples 2145 State Rd 35 Sea Girt, NJ 08750</i>	<i>Office &amp; Printing Supplies</i>	<i>235.70 92.00 155.04</i>	<i>9-18-10 9-21-10 9-25-10</i>	<i>Debit</i>
<i>Super Foodtown 1732 Hwy 35 Wall, NJ 07719</i>	<i>Food for event</i>	<i>63.43 34.61</i>	<i>7-15-10 9-10-10</i>	<i>Debit</i>
<i>Taylor Hardware 914 Main St Belmar, NJ 07719</i>	<i>Keys &amp; Supplies for office</i>	<i>11.49 13.13 55.37</i>	<i>9-2-10 9-6-10 9-11-10</i>	<i>Debit</i>
<i>Tulipanos 1002 Main St Belmar, NJ 07719</i>	<i>Lunch meeting</i>	<i>27.47</i>	<i>7-28-10</i>	<i>Debit</i>
<i>US Postal Service 1300 Main St Belmar, NJ, 07719</i>	<i>Postage</i>	<i>8.80, 150.00 100.00, 17.60</i>	<i>9-17-10 9-21-10 9-27-10 9-29-10</i>	<i>Debit 1020 1022</i>
<i>Web.com 12808 Grand Bay Mway Jacksonville, FL, 32258</i>	<i>Website fees</i>	<i>11.95 11.95</i>	<i>8-2-10 9-1-10</i>	<i>Debit</i>
1. SUBTOTAL (Add all disbursements listed on this page.)		<i>988.54</i>		
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 14, Column A.)		<i>4,098.50</i>		



**ITEMIZED EXPENDITURES MADE AND INCURRED**  
**ON BEHALF OF CANDIDATES AND COMMITTEES** SCHEDULE E Page No. 12 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
 USE A SEPARATE "SCHEDULE E" FOR EACH SEPARATE ACCOUNT AND EACH SEPARATE RECIPIENT TYPE

NEW JERSEY GUBERNATORIAL CANDIDATES/COMMITTEES       NEW JERSEY LEGISLATIVE CANDIDATES/COMMITTEES       ALL OTHER CANDIDATES/COMMITTEES

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME:

PAYEE NAME, ADDRESS (Number, Street, City, State and Zip Code)	PURPOSE	AMOUNT(S) THIS PERIOD		TRANSACTION DATE(S)	CHECK NO(S).
		INCURRED/NOT PAID	DISBURSED		

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEES(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT

PAYEE NAME, ADDRESS (Number, Street, City, State and Zip Code)	PURPOSE	AMOUNT(S) THIS PERIOD		TRANSACTION DATE(S)	CHECK NO(S).
		INCURRED/NOT PAID	DISBURSED		

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEES(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT

1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page.)	0
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 16a, Line 16b, or Line 16c, Column A.)	0
3. SUBTOTAL (Add all outstanding obligations incurred/ not paid, listed on this page.)	0
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/ NOT PAID (Complete this line on the last page used. Carry back to Page 10, "Schedule F," Line 2.)	0

**DEBTS AND OBLIGATIONS OWED BY COMMITTEE**

SCHEDULE F

PAGE No. 13 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
 USE A SEPARATE "SCHEDULE F" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME:

CREDITOR NAME AND ADDRESS (Number, Street, City, State and Zip Code)	OUTSTANDING BEGINNING BAL- ANCE THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENTS THIS PERIOD	OUTSTANDING BALANCE THIS PERIOD
DEBT PURPOSE				

DEBT PURPOSE				
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DEBT PURPOSE				
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DEBT PURPOSE				
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SUMMARY OF DEBTS AND OBLIGATIONS:	
1. TOTAL OUTSTANDING LOANS PLUS INTEREST FROM SCHEDULE B, PAGE 5, LINE 4	0
2. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID ON BEHALF OF CANDIDATES/COMMITTEES FROM SCHEDULE E, PAGE 9, LINE 4	0
3. TOTAL OUTSTANDING OBLIGATIONS, SCHEDULE F (Complete this line on the last page used.)	0
4. TOTAL OUTSTANDING DEBTS/OBLIGATIONS OWED BY COMMITTEE (Add lines 1, 2 and 3. Carry forward to front page, Line 10.)	0

**DEBTS AND OBLIGATIONS OWED TO COMMITTEE**  
 (Accounts Receivable) SCHEDULE G Page No. 14 of 14

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
 USE A SEPARATE "SCHEDULE G" FOR EACH SEPARATE ACCOUNT

COMMITTEE NAME: Belmar Democratic Committee

ACCOUNT NAME:

DEBTOR NAME AND ADDRESS (Number, Street, City, State and Zip Code)	BALANCE DUE AT BEGINNING OF THIS PERIOD	NEW AMOUNT THIS PERIOD	TOTAL AMOUNT RECEIVED THIS PERIOD	BALANCE DUE AT CLOSE OF THIS PERIOD
DATE DEBT INCURRED   DEBT DESCRIPTION				

DATE DEBT INCURRED   DEBT DESCRIPTION				
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DATE DEBT INCURRED   DEBT DESCRIPTION				
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DATE DEBT INCURRED   DEBT DESCRIPTION				
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DATE DEBT INCURRED   DEBT DESCRIPTION				
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1. SUBTOTAL (Add all debts and obligations owed to committee listed on this page.)	0
2. TOTAL DEBTS AND OBLIGATIONS OWED TO COMMITTEE (Complete this line on the last page used. Carry forward to front page, Line 8.)	0

**Belmar Democratic Committee  
3rd Quarter 2010 Report**

**Contribution Details**

<b>Last</b>	<b>First</b>	<b>Address</b>	<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Date</b>	<b>Total</b>	<b>Occupation</b>	<b>Employer</b>
Doherty	Matthew	112 Inlet Tr	Belmar	NJ	07719	8/30/2010	\$500	Financial Adviser	Creative Financial Group
Deicke	Doug	1017 14th Ave	Belmar	NJ	07719	8/30/2010	\$500	Retired	N/A
Scudlery	Victor	1390 Hwy 36, Suite 105	Hazlet	NJ	07730	7/21/2010	\$300	Not Provided	Not Provided
Day	Stephen	1408 L Street	Belmar	NJ	07719	9/15/2010	\$150	Not Provided	Not Provided
Kaye	Samuel	414 7th Ave	Belmar	NJ	07719	9/24/2010	\$50	Retired	N/A
Gutierrez	Concetta	306 14th Ave	Belmar	NJ	07719	7/1/2010	\$23.90 (In-Kind)	None	None