

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

GROSSMAN FOR CONGRESS COMMITTEE

ADDRESS (number and street) 453 SHORE ROAD

Check if different than previously reported. (ACC)

SOMERS POINT

NJ

08244

CITY

STATE

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C C00676726

3. IS THIS REPORT

NEW

(N)

OR

AMENDED (A)

STATE DISTRICT

NJ

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01 / 01 / 2019

through

03 / 31 / 2019

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

Curtis, Elizabeth, , ,

Signature of Treasurer

Curtis, Elizabeth, , ,

[Electronically Filed]

Date

04 / 14 / 2019

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

Office Use Only

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**GROSSMAN FOR CONGRESS COMMITTEE**

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))....	2965.00	277783.20
(b) Total Contribution Refunds (from Line 20(d)) .....	2700.00	1564.93
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	265.00	276218.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	2926.59	279059.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	5944.66	2211.01
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	- 3018.07	276848.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8557.26	
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).....	18047.85	

**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 05/2016)

Write or Type Committee Name

**GROSSMAN FOR CONGRESS COMMITTEE**

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).....	1900.00	188192.04
(ii) Unitemized.....	565.00	78341.16
(iii) TOTAL of contributions from individuals ▶	2465.00	266533.20
(b) Political Party Committees.....	0.00	4900.00
(c) Other Political Committees (such as PACs).....	500.00	6300.00
(d) The Candidate.....	0.00	50.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	2965.00	277783.20
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	6550.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	6550.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	5944.66	2211.01
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	8909.66	286544.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2926.59	279059.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
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 .....	2700.00	1564.93
(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)).....	2700.00	1564.93
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5626.59	280624.14

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5274.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8909.66
25. SUBTOTAL (add Line 23 and Line 24).....	14183.85
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5626.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8557.26

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

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

FOR LINE NUMBER: PAGE 5 OF 14  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**Green, Robert, , ,**  
 Mailing Address 1512 Atkinson Ave  
 City Somers Point State NJ Zip Code 08244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RD Green Engineering Occupation Engineer  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 19 / 2019  
**Transaction ID : SA11AI.7174**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Kerasotes, Denis, , ,**  
 Mailing Address 31 Fairview Ln  
 City Springfield State IL Zip Code 62711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2019  
**Transaction ID : SA11AI.7172**  
 Amount of Each Receipt this Period  
 650.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Villon, Barbara, , ,**  
 Mailing Address 25 Poppy Rd  
 City Egg Harbor Twp State NJ Zip Code 08234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 15 / 2019  
**Transaction ID : SA11AI.7184**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1900.00

# 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 14	
<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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
Desiderio for Freeholder Committee

Mailing Address 32 61st St

City Sea Isle City	State NJ	Zip Code 08243
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11C.7197**

Amount of Each Receipt this Period

Memo Item  
 Permissible Funds

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="500.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="500.00"/>

**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 14	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" 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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**Atlantic Media & Research**

Mailing Address P.O. Box 297

City: Rodanthe State: NC Zip Code: 27968

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

Name of Employer: Occupation:

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 5936.56

Date of Receipt: 01 / 15 / 2019

Transaction ID : SA14.7171

Amount of Each Receipt this Period: 5936.56

Memo Item  
Media Buy Refund

**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:

Amount of Each Receipt this Period:

Memo Item

**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:

Amount of Each Receipt this Period:

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5936.56
<b>TOTAL</b> This Period (last page this line number only).....▶	5936.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Cooper, Darwin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2019	
Mailing Address 1976 NE Ave #7			FEC Identification Number C C00676726	
City Vineland	State NJ	Zip Code 08360	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Strategic Consulting		Category/ Type	Transaction ID : SB17.7150	
Candidate Name <b>GROSSMAN FOR CONGRESS COMMITTEE</b>			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NJ District: 02				

Full Name (Last, First, Middle Initial) <b>B. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2019	
Mailing Address One Hacker Way			FEC Identification Number C C00676726	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 22.05	
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : SB17.7162	
Candidate Name <b>GROSSMAN FOR CONGRESS COMMITTEE</b>			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NJ District: 02				

Full Name (Last, First, Middle Initial) <b>c. L2 Political</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2019	
Mailing Address 18912 North Creek Parkway, Suite 2			FEC Identification Number C C00676726	
City Bothell	State WA	Zip Code 98011	Amount of Each Disbursement this Period 621.96	
Purpose of Disbursement List Rental		Category/ Type	Transaction ID : SB17.7152	
Candidate Name <b>GROSSMAN FOR CONGRESS COMMITTEE</b>			<input type="checkbox"/> Memo Item	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NJ District: 02				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	944.01
<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 9 OF 14	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

**A. L2 Political**

Full Name (Last, First, Middle Initial)  
Mailing Address 18912 North Creek Parkway, Suite 2

City Bothell State WA Zip Code 98011

Purpose of Disbursement List Rental

Candidate Name **GROSSMAN FOR CONGRESS COMMITTEE** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 02

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C C00676726

Amount of Each Disbursement this Period: 1403.91

Transaction ID : SB17.7163

Memo Item

**B. Mailchimp**

Full Name (Last, First, Middle Initial)  
Mailing Address Ponce City Market

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Email Server

Candidate Name **GROSSMAN FOR CONGRESS COMMITTEE** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 02

Date of Disbursement: 03 / 25 / 2019

FEC Identification Number: C C00676726

Amount of Each Disbursement this Period: 50.00

Transaction ID : SB17.7163

Memo Item

**c. Stripe**

Full Name (Last, First, Middle Initial)  
Mailing Address 185 Berry St #550

City San Francisco State CA Zip Code 94107

Purpose of Disbursement Credit Card Fees

Candidate Name **GROSSMAN FOR CONGRESS COMMITTEE** Category/Type

Office Sought:  House  Senate  President Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 02

Date of Disbursement: 03 / 31 / 2019

FEC Identification Number: C C00676726

Amount of Each Disbursement this Period: 8.70

Transaction ID : SB17.7183

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1462.61

**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 10 OF 14			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Thomas, Steven, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2019		
Mailing Address 1684 Bayfield Way			FEC Identification Number <b>C</b> C00676726		
City Reston	State VA	Zip Code 20194	Amount of Each Disbursement this Period 100.00		
Purpose of Disbursement Fundraising Commission		Category/ Type	Transaction ID : <b>SB17.7159</b>		
Candidate Name <b>GROSSMAN FOR CONGRESS COMMITTEE</b>		Disbursement For: 2018 <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: 02		<input type="checkbox"/> Memo Item		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2506.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 14	
	<input type="checkbox"/> 17 <input checked="" 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

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)  
**GROSSMAN FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Zieve, Peter, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2019	
Mailing Address 4413 Chennault Beach Rd			FEC Identification Number C C00676726	
City Mukilteo	State WA	Zip Code 98275	Amount of Each Disbursement this Period 2700.00	
Purpose of Disbursement Refund excessive contribution			Transaction ID : SB20A.7192	
Candidate Name <b>GROSSMAN FOR CONGRESS COMMITTEE</b>			Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NJ	District: 02			

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			Memo Item <input type="checkbox"/>	
Candidate Name				
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			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement			Memo Item <input type="checkbox"/>	
Candidate Name				
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).....▶	2700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2700.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **GROSSMAN FOR CONGRESS COMMITTEE** Transaction ID : **SC/10.4193**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>GROSSMAN, SETH, , ,</b>		<input type="checkbox"/> Memo Item	Election: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 101 SOUTH PLAZA PLACE UNIT #1202			
City ATLANTIC CITY	State NJ	ZIP Code 08401	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 3000.00	Cumulative Payment To Date 1850.00	Balance Outstanding at Close of This Period 1150.00
------------------------------------	---------------------------------------	--

<b>TERMS</b>	Date Incurred M 05 / D 24 / Y 2018	Date Due M M / D D / June 24, 2018	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	---------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1150.00
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **GROSSMAN FOR CONGRESS COMMITTEE** Transaction ID : **SC/10.6823**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>GROSSMAN, SETH, , ,</b>		<input type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 101 SOUTH PLAZA PLACE UNIT #1202			
City ATLANTIC CITY	State NJ	ZIP Code 08401	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 11497.85	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 11497.85
-------------------------------------	------------------------------------	---

<b>TERMS</b>	Date Incurred M 11 / D 07 / Y 2018	Date Due M M / D D / Y 12/31/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	11497.85
<b>TOTALS</b> This Period (last page in this line only).....▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **GROSSMAN FOR CONGRESS COMMITTEE** Transaction ID : **SC/10.7096**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>GROSSMAN, SETH, , ,</b>		<input type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 101 SOUTH PLAZA PLACE UNIT #1202			
City ATLANTIC CITY	State NJ	ZIP Code 08401	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 5400.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5400.00
------------------------------------	------------------------------------	--

<b>TERMS</b>	Date Incurred M 12 / D 31 / Y 2018	Date Due M M / D D / Y 12/31/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--------------	---------------------------------------	--------------------------------------	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City	State	ZIP Code
	Amount Guaranteed Outstanding:	

<b>SUBTOTALS</b> This Period This Page (optional).....▶	5400.00
<b>TOTALS</b> This Period (last page in this line only).....▶	18047.85

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.