

**RECEIPTS AND EXPENDITURES QUARTERLY REPORT**

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 <http://www.elec.state.nj.us/>

FOR STATE USE ONLY  
**ELEC RECEIVED**  
**OCT 15 2013**

COMMITTEE NAME OR APPROVED ACRONYM

REPUBLICAN NATIONAL COMMITTEE ( R N C )

ADDRESS (number and street)  CHECK IF DIFFERENT THAN PREVIOUSLY REPORTED

310 FIRST ST., SE

CITY, STATE and ZIP CODE

WASHINGTON, DC 20003

ELEC IDENTIFICATION NUMBER

K 0000 0022 22Q

COMMITTEE TYPE

CPC  PPC  LLC

CHECK IF

AMENDMENT

FIRST REPORT FILED

REPORT QUARTER

APR 15  JUL 15  OCT 15  JAN 15  
 YEAR 2013

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 <u>7/1/13</u> THROUGH <u>9/30/13</u>	THIS REPORT	CALENDAR YEAR-TO-DATE
1. CASH ON HAND, JANUARY 1, <u>2013</u>			0
2. CASH ON HAND, BEGINNING OF REPORTING PERIOD		0	
3. MONETARY RECEIPTS (+)		3,254,613	3,254,613
4 SUBTOTAL		3,254,613	3,254,613
5. MONETARY EXPENDITURES (-)		366,592	366,592
6 CASH ON HAND, CLOSE OF REPORTING PERIOD		2,888,021	2,888,021

NET FINANCIAL SUMMARY		
7. CASH ON HAND, CLOSE OF REPORTING PERIOD		2,888,021
8. DEBT OWED TO COMMITTEE (+)		0
9 SUBTOTAL		2,888,021
10. DEBT OWED BY COMMITTEE (-)		0
11. TOTAL (Net Worth)		2,888,021

**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.

10/14/13  
 DATE

CHARLES A. LAMBIASE  
 PRINT NAME

SIGNATURE

720 E. MAIN ST., SUITE 2D  
 ADDRESS

856 235 6111  
 \*(AREA CODE) DAY TELEPHONE NUMBER

MOORESTOWN, NJ 08057

856 235 6111  
 \*(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	3,254,613	3,254,613
2 Contributions, more than \$300 (Schedule A)	0	0
2a Currency Contributions (Schedule A)	0	0
3 Total (Add lines 1, 2 and 2a)	3,254,613	3,254,613
4 Refund of Contributions (Adjustment Schedule) (-)	0	0
5 Subtotal (Subtract line 4 from line 3)	3,254,613	3,254,613
Other Receipts		
6 Reimbursements/Refunds (Schedule A)	0	0
7 Dividends/Interest (Schedule A)	0	0
8 Loans Received by Committee, \$300 or Less	0	0
9 Loans Received by Committee more than \$300 and all Currency Loans (Schedule B)	0	0
10 Total Monetary Receipts (Add lines 5 through 9)	3,254,613	3,254,613
11 In-kind Contributions, \$300 or less	0	0
12 In-kind Contributions, more than \$300 (Schedule A)	0	0
13 Gross Receipts (Add lines 10, 11 and 12)	3,254,613	3,254,613
<b>TABLE II EXPENDITURES</b>		
14 Operating Disbursement (Schedule C)	115,149	115,149
Contributions (from the Committee) to		
15a NJ Gubernatorial Candidates/Committees (Schedule D)	0	0
15b NJ Legislative Candidates/Committees (Schedule D)	0	0
15c All other Candidates/Committees (Schedule D)	251,443	251,443
Expenditures Made on Behalf of		
16a NJ Gubernatorial Candidates/Committees (Schedule E)	0	0
16b NJ Legislative Candidates/Committees (Schedule E)	0	0
16c All other Candidates/Committees (Schedule E)	0	0
17 Loan Payments (Schedule B)	0	0
18 Total Monetary Expenditures (Add lines 14 through 17)	366,592	366,592
19 In-kind contributions, \$300 or Less (Table I, Line 11)	0	0
20 In-kind contributions, more than \$300 (Table I, Line 12)	0	0
21 Gross Expenditures (Add lines 18 through 20)	366,592	366,592

**DEPOSITORY SUMMARY - PLEASE TYPE OR PRINT PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED**

Committee Name

**BANK ACCOUNT INFORMATION**

1 Name of Bank BANK OF AMERICA (Area Code) Telephone Number 202-624-4600

Mailing Address 201 PENNSYLVANIA AVE NW

City, State, Zip Code WASHINGTON DC 20003

Account Name RNC - NS SPECIAL ACCOUNT

Opening Balance this Period <u>0</u>	Deposits this Period <u>3,254,613</u>	Disbursements this Period <u>366,592</u>	Closing Balance this Period <u>2,888,021</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)

- Investment Institution Money Market Account
- Certificate of Deposit (C D)
- Mutual Fund Account
- Other (please specify) \_\_\_\_\_
- Bonds
- Stocks
- Real Property

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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<b>ITEMIZED RECEIPTS (Other than Loans)</b>		<b>SCHEDULE A</b>		Page No _____ of _____
<b>PLEASE TYPE OR PRINT PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.</b>				
Receipt Type (Use a separate "Schedule A" for each type and for each separate account )				
<input type="checkbox"/> Currency <input type="checkbox"/> All other Monetary Contributions <input type="checkbox"/> In-Kind Contributions-Expenditures Made by Others <input type="checkbox"/> Reimbursements/Refunds of Disbursements <input type="checkbox"/> Dividends/Interest				
Committee Name _____				
Account Name _____				
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received this Period	Amount(s) Received this Period	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received	Amount(s) Received	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received	Amount(s) Received	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received	Amount(s) Received	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received	Amount(s) Received	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
Contributor Name		Contributor Address (Number and Street)		
Occupation		City, State, Zip Code		
Employer Name		Date(s) Received	Amount(s) Received	
Employer Address				
City, State, Zip Code				
Receipt Description (If In-Kind)		Aggregate Year-to-Date		
<b>1 SUBTOTAL (Add all receipts listed on this page )</b>				
<b>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 )</b>		0		

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LOANS RECEIVED		SCHEDULE B		Page No		of	
<b>PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED</b>							
Use a separate "SCHEDULE B" for each separate account							
Committee Name							
Account Name							
Name and Address of Lender		Original Loan Amount	New Loan 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		
Employer Name and Address (Number, Street, City, State and Zip Code)						Aggregate Year-to-Date	
1 Name and Address of Guarantor						Amount Outstanding	
Occupation		Employer Name and Address (Number, Street, City, State and Zip Code)				Aggregate Year-to-Date	
2 Name and Address of Guarantor						Amount Outstanding	
Occupation		Employer Name and Address (Number, Street, City, State and Zip Code)				Aggregate Year-to-Date	
Name and Address of Lender		Original Loan Amount	New Loan 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		
Employer Name and Address (Number, Street, City, State and Zip Code)						Aggregate Year-to-Date	
1 Name and Address of Guarantor						Amount Outstanding	
Occupation		Employer Name and Address (Number, Street, City, State and Zip Code)				Aggregate Year-to-Date	
2 Name and Address of Guarantor						Amount Outstanding	
Occupation		Employer Name and Address (Number, Street, City, State and Zip Code)				Aggregate Year-to-Date	
<b>1 TOTAL NEW LOANS, THIS PERIOD</b> (Complete this line on the last page used Carry forward to Page 2, Line 9, Column A )							
<b>2 TOTAL AMOUNT OF LOANS PLUS INTEREST, THIS PERIOD</b>							
<b>3 TOTAL LOAN PAYMENTS, THIS PERIOD</b> (Complete this line on the last page used Carry forward to Page 2, Line 17, Column A )							
<b>4 TOTAL OF ALL OUTSTANDING LOANS PLUS INTEREST</b> (Complete this line on the last page used Carry back to Page 10, "Schedule F", Line 1 )				○			

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED  
Use a separate "ADJUSTMENT SCHEDULE" for each separate account

Committee Name

Account Name

IF A MONETARY CONTRIBUTION IN EXCESS OF THE CONTRIBUTION LIMIT IS DEPOSITED, PLEASE REPORT THE REFUND OF THE EXCESS AMOUNT ON THIS ADJUSTMENT SCHEDULE.

Payment Date	Check No	Payee Name and Address	Refunded Amount

**1 TOTAL REFUND OF CONTRIBUTIONS, THIS PERIOD** (Complete this line on the last page used Carry forward to Page 2, Line 4, Column A )

**PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.**  
 Use a separate "SCHEDULE C" for each separate account

Committee Name

Account Name

Payee or Creditor Name, Address (Number, Street, State, City, State and Zip Code)	Purpose*	Amount(s) Disbursed this Period	Transaction Dates	Check No(s)
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\*Legislative Leadership Committees - See instructions concerning permissible uses of funds

<i>— See LIST ATTACHED —</i>				
		<i>115,149</i>		<i>See LIST</i>

<b>1 SUBTOTAL</b> (Add all disbursements listed on this page )	<i>115,149</i>	
<b>2. TOTAL DISBURSEMENTS, THIS PERIOD</b> (Complete this line on the last page used Carry forward to Page 2, Line 14, Column A )	<i>115,149</i>	

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OPERATING DISBURSEMENTS

Check #	Date	Payee	Address	City	State	Zip	Purpose	Amount
N/A	06/13/13	Bank of America	PO Box 830175	Dallas	TX	75283	Check Order Fees	\$ 110.00
Wire	07/08/13	Comnet Telecomn Supply	1 Kimberly Road, Suite 101	East Brunswick	NJ	08816	Rent	\$ 3,794.00
Wire	07/10/13	Comnet Telecomn Supply	1 Kimberly Road, Suite 101	East Brunswick	NJ	08816	Rent	\$ 406.00
Wire	07/12/13	LSC Partners, L P	9 Mill Street	Paterson	NJ	07501	Rent	\$ 600.00
N/A	07/15/13	Bank of America	PO Box 830175	Dallas	TX	75283	Account Analysis Fee	\$ 105.85
501	08/07/13	LSC Partners, LP	9 Mill Street	Paterson	NJ	07501	Rent	\$ 1,200.00
N/A	08/14/13	BB&T Financial (Credit Card charges from Staples)	PO Box 580340	Charlotte	NC	28258	Office Supplies	\$ 5,402.43
N/A		- Staples Corn	963 Novland Avenue	Chambersburg	PA	17201		\$
N/A	08/15/13	Bank of America	PO Box 830175	Dallas	TX	75283	Account Analysis Fee	\$ 160.76
502	08/20/13	326 Garden Street LLC	326 Garden Street	Carlsdat	NJ	07072	Rent	\$ 2,250.00
503	08/29/13	Comnet Telecomn Supply	1 Kimberly Road, Suite 101	East Brunswick	NJ	08816	Rent	\$ 2,800.00
504	09/04/13	Smartech Corporation	801 Broad Street, Suite 530	Chattanooga	TN	37402	Data Services	\$ 24,308.89
N/A	09/05/13	BB&T Financial (Credit Card charges from Staples)	PO Box 580340	Charlotte	NC	28258	Office Supplies	\$ 1,166.32
		- Staples Corn	963 Novland Avenue	Chambersburg	PA	17201		\$
505	09/06/13	One Arn Park, LLC	9 Madison Avenue	Morristown	NJ	07960	Rent	\$ 1,500.00
506	09/11/13	LSC Partners, LP	9 Mill Street	Paterson	NJ	07501	Rent	\$ 1,200.00
507	09/11/13	Northstar Campaign Systems	11421 Davenport Street	Omaha	NE	68154	Data Services	\$ 4,132.47
508	09/11/13	Smartech Corporation	801 Broad Street, Suite 530	Chattanooga	TN	37402	Data Services	\$ 6,489.13
N/A	09/12/13	BB&T Financial (Credit Card charges from Staples)	PO Box 580340	Charlotte	NC	28258	Office Supplies	\$ 1,008.86
		- Staples Corn	963 Novland Avenue	Chambersburg	PA	17201		\$
Wire	09/12/13	Patrick Sebastian	5113 Shamrock Drive	Raleigh	NC	27612	Travel Expenses	\$ 816.45
509	09/13/13	One Arn Park, LLC	9 Madison Avenue	Morristown	NJ	07960	Rent	\$ 3,700.00
510	09/18/13	Smartech Corporation	801 Broad Street, Suite 530	Chattanooga	TN	37402	Data Services	\$ 5,957.07
N/A	09/19/13	BB&T Financial (Credit Card charges from Staples)	PO Box 580340	Charlotte	NC	28258	Office Supplies	\$ 3,883.34
		- Staples Corn	963 Novland Avenue	Chambersburg	PA	17201		\$
513	09/25/13	Northstar Campaign Systems	11421 Davenport Street	Omaha	NE	68154	Data Services	\$ 7,000.00
514	09/25/13	600 Partispany Associates, LLC	PO Box 416533	Boston	MA	02241	Rent	\$ 4,075.51
515	09/25/13	Smartech Corporation	801 Broad Street, Suite 530	Chattanooga	TN	37402	Data Services	\$ 33,082.24
<b>TOTAL FROM 7/1/13 THROUGH 9/30/13</b>								<b>\$ 115,149.32</b>



PLEASE TYPE OR PRINT PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.  
 Use a separate "SCHEDULE D" 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

Account Name

Recipient Name and Address (Number and Street, City, State, Zip Code)	Election Date District or County or Municipality	Check		Amount of each Contribution
		No(s)	Date(s)	
See LIST	ATTACHED			251,443

1 SUBTOTAL (Add all contributions made to each recipient type listed on this page )      251,443

2 TOTAL, THIS RECIPIENT TYPE, THIS PERIOD (Complete this line on the last page used for each recipient type Carry forward to Page 2, either Line 15a, Line 15b, or Line 15c, Column A )      251,443



ALL OTHER CANDIDATES/COMMITTEES

Check #	Date	Payee	Address	City	State	Zip	Amount
512	09/19/13	Ocean County Republican Finance Committee, Inc	10 Allen Street, Suite 28	Toms River	NJ	08753	100.00
516	09/25/13	Atlantic County Republican Committee	2216 Shore Road	Northfield	NJ	08225	8,220.81
517	09/25/13	Burlington County Republican Organization	223 High Street	Mount Holly	NJ	08060	13,513.94
518	09/25/13	Camden County Republican Committee	PO Box 192	Haddonfield	NJ	08035	14,198.45
519	09/25/13	Cape May County Regular Republican Organization	3200 Pacific Avenue, Suite 200	Wildwood	NJ	08260	3,915.50
520	09/25/13	Cumberland County Republican Organization	1101 Highway 77, Suite A	Bridgeton	NJ	08302	3,679.36
521	09/25/13	Essex County Republican Organization	60 Pompton Avenue	Verona	NJ	07044	14,909.22
522	09/25/13	Gloucester County Executive Republican Organization	PO Box 503	Woodbury	NJ	08096	9,002.88
523	09/25/13	Hudson County Republican Party Inc	140 Audubon Avenue	Jersey City	NJ	07305	11,588.07
524	09/25/13	Hunterdon County Republican Committee	1 State Highway 12, Suite 105	Flemington	NJ	08822	5,303.00
525	09/25/13	Mercer County Republican Organization	957 Route 33	Hamilton	NJ	08960	8,591.53
526	09/25/13	Middlesex County Republican Organization	5 Uncroft Avenue	Old Bridge	NJ	08857	21,289.02
527	09/25/13	Monmouth County Republican Committee	16 West Main Street	Freehold	NJ	07728	24,040.15
528	09/25/13	Morris County Republican Committee	26 Schuyler Place	Morristown	NJ	07960	19,593.35
529	09/25/13	New Jersey Republican State Committee	150 West State Street, Suite 230	Trenton	NJ	08608	21,098.25
530	09/25/13	Ocean County Republican Finance Committee, Inc	10 Allen Street, Suite 28	Toms River	NJ	08753	21,916.22
531	09/25/13	Pasaic County Regular Republican Organization	PO Box 4375	Wayne	NJ	07474	13,526.20
532	09/25/13	Salem County Republican Committee	14 North Main Street	Woodstown	NJ	08098	1,802.05
533	09/25/13	Somerset County Republican Executive Committee	66 East Main Street	Somerville	NJ	08876	11,524.74
534	09/25/13	Sussex County Republican Committee	PO Box 425	Newtown	NJ	07860	6,958.26
535	09/25/13	Republican Committee of Union County	425 North Avenue East	Westfield	NJ	07090	11,988.54
536	09/25/13	Warren County Republican Committee	PO Box 446	Belvedere	NJ	07823	4,683.27

251,442.81

**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

- |   |   |
|---|---|
| <input type="checkbox"/> New Jersey Governorial Candidates/Committees | <input type="checkbox"/> New Jersey Legislative Candidates/Committees |
| <input type="checkbox"/> All Other Candidates/Committees              | <input type="checkbox"/> Independent Expenditures                     |

Committee Name \_\_\_\_\_

Account Name \_\_\_\_\_

Payee Name and Address <small>(Number, Street, City, State and Zip Code)</small>	Purpose	Amount(s) this Period		Transaction	Check
		Incurred/Not Paid	Disbursed	Date(s)	No(s)

**ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)**

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount

Payee Name and Address <small>(Number, Street, City, State and Zip Code)</small>	Purpose	Amount(s) this Period		Transaction	Check
		Incurred/Not Paid	Disbursed	Date(s)	No(s)

**ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)**

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount

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

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<b>DEBTS AND OBLIGATIONS OWED BY COMMITTEE</b>		<b>SCHEDULE F</b>	<b>Page No</b>	<b>of</b>
<b>PLEASE TYPE OR PRINT PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED</b>				
Use a separate "SCHEDULE F" for each separate account				
Committee Name				
Account Name				
<b>Creditor Name and Address</b> (Number, Street, City, State, and Zip Code)	<b>Outstanding Beginning Balance</b> this Period	<b>Amount Incurred</b> this Period	<b>Payments</b> this Period	<b>Outstanding Balance</b> this Period
Debt Purpose				
Debt Purpose				
Debt Purpose				
Debt Purpose				
<b>SUMMARY OF DEBTS AND OBLIGATIONS</b>				
<b>1 TOTAL OUTSTANDING LOANS PLUS INTEREST FROM SCHEDULE B, PAGE 5, LINE 4</b>				
<b>2 TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID ON BEHALF OF CANDIDATES/COMMITTEES FROM SCHEDULE E, PAGE 9, LINE 4</b>				
<b>3 TOTAL OUTSTANDING OBLIGATIONS, SCHEDULE F</b> (Complete this line on the last page used )				
<b>4 TOTAL OUTSTANDING DEBTS/OBLIGATIONS OWED BY COMMITTEE</b> (Add lines 1, 2 and 3 Carry forward to front page, Line 10 )			0	

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<b>DEBTS AND OBLIGATIONS OWED TO COMMITTEE</b> (Accounts Receivable)		<b>SCHEDULE G</b>		Page No.      of	
<b>PLEASE TYPE OR PRINT PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED</b> Use a separate "SCHEDULE G" for each separate account					
Committee Name					
Account Name					
<b>Debtor Name and Address</b> (Number, Street, City, State, and Zip Code)		<b>Balance Due</b> at beginning of this Period	<b>New Amount</b> this Period	<b>Total Amount</b> Received this Period	<b>Balance Due</b> at Close of this Period
<b>Date Debt Incurred</b>	<b>Debt Description</b>				
<b>Date Debt Incurred</b>	<b>Debt Description</b>				
<b>Date Debt Incurred</b>	<b>Debt Description</b>				
<b>Date Debt Incurred</b>	<b>Debt Description</b>				
<b>Date Debt Incurred</b>	<b>Debt Description</b>				
<b>SUMMARY OF DEBTS AND OBLIGATIONS</b>					
<b>1 SUBTOTAL</b> (Add all debts and obligations owed to committee listed on this page )					
<b>2 TOTAL DEBTS AND OBLIGATIONS OWED TO COMMITTEE</b> (Complete this line on the last page used Carry forward to front page, Line 8 )				○	

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