

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE) <input type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input checked="" type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr 15, _____ <input type="checkbox"/> July 15, _____ <input type="checkbox"/> Oct 15, _____ <input type="checkbox"/> Jan 15, _____ Amendment Yes <input type="checkbox"/> No <input type="checkbox"/>
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 JUN 21 2013
CANDIDATE OR COMMITTEE NAME GROSSMAN FOR GOVERNOR COMMITTEE		
STREET ADDRESS 453 Shore Rpad		
CITY Somers Point	STATE NJ	
COUNTY Atlantic	ELECTION DISTRICT OR MUNICIPALITY State of New Jersey	
POLITICAL PARTY, IF ANY Republican	OFFICE SOUGHT Governor	
ELECTION DATE June 4, 2013	ELECTION TYPE (CHECK ONE) <input checked="" type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL	<input type="checkbox"/> MUNICIPAL <input type="checkbox"/> RUN-OFF
	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT	<input type="checkbox"/> SPECIAL
SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED		
TABLE I. RECEIPTS		
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS	THIS REPORT	CUMULATIVE TO DATE
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 1,535	\$ 10,965
3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ -0-	\$ 700
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ -0-	\$ 150
5 LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ -0-	\$ -0-
6 SUB TOTAL (ADD LINES 1 THRU 5)	\$ 1,535	\$ 1,200
7 REFUND OF EXCESSIVE CONTRIBUTIONS [Adjustment Schedule] (-)	\$ -0-	\$ 13,015
8 TOTAL CONTRIBUTIONS	\$ 1,535	\$ -0-
9 ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ -0-	\$ -0-
10 TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 1,535	\$ 13,015
TABLE II EXPENDITURES		
1 DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	THIS REPORT	CUMULATIVE TO DATE
2 DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 11,595	\$ 11,595
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ -0-	\$ -0-
4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 250	\$ -0-
5 IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ -0-	\$ -250-
6 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ -0-	\$ -0-
7 SUB TOTAL (ADD LINES 1 THRU 6)	\$ 1,143	\$ 11,845
8 REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ -0-	\$ -0-
9 TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 1,143	\$ 11,845

SCHEDULE A

Monetary Contributions in Excess of \$300 and All Currency Contributions

CONTRIBUTOR NAME <i>NONE NA</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ - 0 -
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ - 0 -

SCHEDULE B
In-Kind Contributions in Excess of \$300

CONTRIBUTOR NAME <i>NAME</i>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ - 0 -
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ - 0 -

SCHEDULE C
Loans Received in Excess of \$300 and All Currency Loans

LENDER NAME <i>ZERO</i>		EMPLOYER NAME	
LENDER ADDRESS <i>MA</i>		EMPLOYER ADDRESS	
OCCUPATION			
CO-SIGNER NAME		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$	
DATE(S) RECEIVED	AGGREGATE AMOUNT \$	CHECK IF CURRENCY <input type="checkbox"/>	
LENDER NAME		EMPLOYER NAME	
LENDER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION			
CO-SIGNER NAME		EMPLOYER NAME	
CO-SIGNER ADDRESS		EMPLOYER ADDRESS	
OCCUPATION		AMOUNT(S) RECEIVED THIS PERIOD \$	
DATE(S) RECEIVED	AGGREGATE AMOUNT \$ <i>- 0 -</i>	CHECK IF CURRENCY <input type="checkbox"/> <i>MA</i>	
TOTAL AMOUNT OF LOANS RECEIVED THIS REPORT PERIOD		\$ <i>- 0 -</i>	

ADJUSTMENT SCHEDULE
Refund of Excessive Contributions

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
<p>DOES NOT APPLY — NONE —</p>			\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 2500
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 2500

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5/28/13	PROCESSED	RAULY, ANG	COLLECT	\$ 265	\$ NA	\$ NA
6/3/13	ONLINE	144 TO	ONLINE			
6/7/13	PM IN	144 SECOND ST	CONTRIBUTIONS			
6/19/13	70	SPM FRANCISCO, CA				
	POST IT	94105				
5/26/2013	70					
6/15/2013		SEE ATTACHED				
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$	\$	\$
TOTAL, THIS PAGE				\$	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$	\$	\$
GRAND TOTAL				\$	\$	\$

ATTACHMENT TO SCHEDULE 1(D)

GROSSMAN FOR GOVERNOR COMMITTEE CAMPAIGN FINANCE REPORT 20 DAYS AFTER ELECTION				PURPOSE
SCHEDULE 1(D) DISBURSEMENTS CAMPAIGN EXPENSES				
5/26/2013	MB Bennett for Senate #996 307 Dorchester Egg Harbor Twp, NJ 08234		(\$250)	POLITICAL CAMPAIGN (SEE SCHEDULE 3D)
6/1/2013	Wawa P'ville Gas Black Horse Pike Egg Harbor Twp, NJ 08234	debit	(\$29 02)	GAS
5/31/2013	Millville Queen Diner Broad & 1st Streets Millville, NJ 08332	debit	(\$28 03)	MEALS
6/1/2013	Wawa P'ville Gas Black Horse Pike Egg Harbor Twp, NJ 08234	debit	(\$40 00)	GAS
6/3/2013	Facebook	debit	(\$28 08)	ONLINE ADS
6/3/2013	Facebook	debit	(\$63 23)	
6/5/2013	Facebook 156 University Ave Palo Alto, CA 94301-1605	debit	(\$260 68)	
6/3/2013	Google	debit	(\$10 00)	EMAIL
6/6/2013	Google 1600 Amphiteatere Parkway Mountain View, CA 94043	debit	(\$5 00)	ADDRESSES
6/12/2013	Gallco Media #997 PO Box 67 Belford, NJ 07718		(\$50)	ONLINE ADS
6/15/2013	Press Plus Devins Lane Pleasantville, NJ 08232	debit	(\$7 95)	NEWSPAPERS SUBSCRIPTION
6/15/2013	Verizon Wireless PO Box 33078 St Petersburg, FL 33733	debit	(\$106 30)	CELL PHONES

SCHEDULE 3(D) - DISBURSEMENTS
 Contributions made to other Candidates/Committees

PAYMENT DATE	CHECK NO	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
5/26/13	#996	MARYBETH BENNETT FOR SENATE COMMITTEE	307 DANCHESTER EGG HARBOR TWP, NJ 08234	\$ 250
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 250
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				1 \$ 250
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				2 \$ 250
				3 \$ 250

SCHEDULE E
Outstanding Obligations

Date Incurred	Creditor's Name	Address	Description	Amount
	<i>NONE</i>			\$
			TOTAL OUTSTANDING OBLIGATIONS	\$ <i>0 -</i>

SCHEDULE F
Refunded Disbursements

Date	Full Name	Address	Description	Amount
	<i>NONE</i>			\$
			SCHEDULE F TOTAL	\$ <i>0 -</i>

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
NONE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ ZERO
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ ZERO

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report
 (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero) \$ 656

Funds Transferred from Prior Campaign \$ N/A

Deposits (Include interest) \$ 1,270

Disbursements (Include bank charges) \$ (878)

Closing Balance, this Report \$ 1,048 ^(\$9 error)

CAPE BANK GROSSMAN FOR GOVERNOR COMM
 NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT

225 N MAIN STREET, CAPE MAY CT HOUSE, NJ 08210
 ADDRESS OF BANK OR DEPOSITORY

SETH GROSSMAN 609-927-7333
 NAME OF TREASURER TELEPHONE NUMBER (DAY)

453 SHORE RD, SOMERS PT, NJ 08244
 ADDRESS OF TREASURER

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.

<u>6/20/2013</u> DATE	<u>SETH GROSSMAN</u> PRINT FULL NAME (CANDIDATE)	<u>[Signature]</u> SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
<u>6/20/2013</u> DATE	<u>SETH GROSSMAN</u> PRINT FULL NAME (TREASURER)	<u>[Signature]</u> SIGNATURE (TREASURER)

Treasurers for gubernatorial and legislative candidates are required to receive training with the New Jersey Election Law Enforcement Commission. Check here if you have completed the training and enter your Treasurer Training ID# _____

DECLARATION OF FINAL REPORT

If this is the final report, sign applicable Declaration below as well as Certification above. Chapter 65 of the Laws of 1993 requires that all filing entities continue to file reports with the Commission until all campaign business is wound up and the fund is dissolved.

I certify that all contributions or other monies received by this election fund have been disbursed, that there are no outstanding loans or other obligations, and that the election fund has wound up its business and has been dissolved.

_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (TREASURER)	_____ SIGNATURE (TREASURER)