FORM R-1	REPORT		29 - DAY PR	E-ELECTION		
NEW JERS		V ENFORCEMENT COMMISSION		11 - DAY PRI		
(609) 2		enton, NJ 08625-0185 Vithin NJ 1-888-313-ELEC (3532)		20 - DAY PO Apr. 15,	ST-ELECTION	
(003) 2		elec.nj.gov		July 15,		
CANDIDATE OB C				Oct. 15,	,	
STREET ADDRES	<u>ım Davis</u>			Jan. 15,		
ने वि	Broadway	<u>.</u>		Amendment Yes	□ No 🙇	
CITY	0	STATE ZIP CODE			te Use Only	
COUNTY		NA 07002 ELECTION DISTRICT OR MUNICIPALITY	ELEC N	CHVE)		
Histon		•	APR 2	7 2018		
POLITICAL PARTY	, IF ANY		1			
ELECTION DATE	·	(asser)				
ELECTION DATE	ELECTION TYPE (CHECK ONE)	PRIMARY MAY MUNIC	JPA	L SCHOOL FIRE DIS		
SUMMARY TAB		MPT TO COMPLETE TABLES I AND II UN SCHEDULES HAVE BEEN COMPLETED				
TABLE I. RECEI	PTS			THIS REPORT	CUMULATIVE TO DATE	
		\$	15,025 \$ 98,835			
2. MONETARY CONTRIBUTION	ONTRIBUTIONS IN EX NS (Schedule A)	\$ (69.900	\$ 188,400		
E .		\$	-	\$		
4. IN-KIND CONT	RIBUTIONS IN EXCES	\$		\$		
	VED IN EXCESS OF \$	\$		\$		
6. SUB TOTAL		\$	82,925	\$ 287,235		
7. REFUND OF C	ONTRIBUTIONS [Adju	stment Schedule] (-)	\$		\$ 2,000	
8. TOTAL CONTR	RIBUTIONS		\$	82,925	\$ 285,235	
9. ADD FUNDS T	RANSFERRED FROM	\$		\$		
10. TOTAL RECEI	PTS	\$	82925	\$ &85,&35		
TABLE II. EXPE	NDITURES					
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (10. TOTAL RECEIPTS (ADD LINE 8 + LINE TABLE II. EXPENDITURES 1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]				73,012,91	5 230,322.16	
	REFUND OF CONTRIBUTIONS [Adjustment Schedule] TOTAL CONTRIBUTIONS ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN TOTAL RECEIPTS (ADD LINE 8 + LINE ABLE II. EXPENDITURES DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)] DISBURSEMENTS - OTHER [Schedule 2(D)] DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)] CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)] IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)				\$	
			\$		\$	
4. CONTRIBUTION	ONS MADE ON BEHA	\$	/	\$ /		
1 ··· · · · · · · · · · · · · · · ·				/	\$ /	
6. IN-KIND CON	TRIBUTIONS IN EXCE	SS OF \$300 (TABLE I, LINE 4)	\$	/	\$	
7. SUB TOTAL		(ADD LINES 1 THRU 6)	\$	73.012.91	\$ 23032216	
8. REFUNDED D	ISBURSEMENTS [Sch	nedule F] (-)	\$		\$ —	
9. TOTAL EXPE	NDITURES	(LINE 7 MINUS LINE 8)	\$ 1	72 01201	\$ 2130.3224	

SCHEDULE A

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

CONTRIBUTOR NAME	TEMPLOYED MANE	<u> </u>
	EMPLOYER NAME	1 P
CONTRIBUTOR ADDRESS	Weiner	an Group
629 PArsinopping Ad	EMPLOYER ADDRESS	name Al
Parainan AIT	Parana	115
ICHECK IF TAGGREGATE AMOUNT	T DATE(S) RECEIVED	140
CHECK IF CURRENCY S 13,000	4/16/18	* 13,000
CONTRIBUTOR NAME	EMPLOYER NAME	
CONTRIBUTOR ADDRESS	OCP Cons	furtin LLC
65 KINGS AND Nove #3	EMPLOYER ADDRESS	land Ave #2
Clistan NS	Chillan 1	VJ
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION Consticution	4/17/18	\$ 10,000
CONTRIBUTOR NAME	EMPLOYER NAME	
CONTRIBUTOR ADDRESS	THE OVER ADDRESS	
26 W 4R 3T.	EMPLOYER ADDRESS	
New York, NY 10036		
CHECK IF AGGREGATE AMOUNT CURRENCY \$ 9800	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION	1/20/18	9,800
CONTRIBUTOR NAME	EMPLOYER NAME	
CONTRIBUTOR ADDRESS	TAND OVER ADDRESS	
Edustion	EMPLOYER ADDRESS	
709 Eight Ave, New York 10036		
	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION	1/20/18	\$ 7,500
ANThony MARCAGO	EMPLOYER NAME	
CONTRIBUTOR ADDRESS 222 Mr Klock Ad WALLY	EMPLOYER ADDRESS	
WATEN NJ		
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION \$/0,060	4/20/18	\$ 10,000
(COURT ETE TUIC LINE FOR EVERY RACE LICER) TOT		2 ax
	TAL, THIS PAGE	\$50,300
(COMPLETE THIS LINE FOR LAST PAGE USED) GRA	AND TOTAL	<u>\$</u>
Manual Control of the		_

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

CONTRIBUTOR NAME	EMPLOYER NAME	/
RAINA LAMAINTO	CANGAN ho	YNV
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	L/Aif
	Seacus	115
CHECK IF AGGREGATE AMOUNT CURRENCY \$ 7.5	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$ 7,500
	2/10/10	17300
CONTRIBUTOR NAME NOTEL WALLS	EMPLOYER NAME	
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
New York New York		
CHECK IF AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD
OCCUPATION	4/18/18	\$ 7,500
CONTRIBUTOR NAME	EMPLOYER NAME	Tal Partners LLC
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
CHECK IF AGGREGATE AMOUNT CURRENCY S & J, K 00	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$ 1
OCCUPATION	2.15/18	2,000
CONTRIBUTOR NAME	EMPLOYER NAME	*****
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
CHECK IF AGGREGATE AMOUNT CURRENCY S	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION		
COMPLETE THIS LINE FOR EVERY PAGE USED)	EMPLOYER NAME	
CONTRIBUTOR ADDRESS	EMPLOYER ADDRESS	
CURRENCY L \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
(COMPLETE THIS LINE FOR EVERY PAGE USED) TO	TAL, THIS PAGE	\$17,600
(COMPLETE THIS LINE FOR LAST PAGE USED) GR	RAND TOTAL	\$67,900
NNew Jersey Election Law Enforcement Commission 2	<u>-</u>	FORUM ABOVE AND ADDRESS OF THE PARTY OF THE

SCHEDULE B

In-Kind Contributions in Excess of \$300

CONTRIBUTOR NAME		EMPLOYER NAME				
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	S			
	TAGOREGATE ANGUNT		Indiana and a second			
OCCUPATION	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$			
DESCRIPTION OF IN-KIND CONTRIB	UTION(S)					
	OTION(3)					
CONTRIBUTOR NAME		EMPLOYER NAME				
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	S			

	AGGREGATE AMOUNT	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$			
OCCUPATION						
DESCRIPTION OF IN-KIND CONTRIB	UTION(S)					
CONTRIBUTOR NAME		EMPLOYER NAME				
CONTRIBUTOR ADDRESS	-	EMPLOYER ADDRESS	S			
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$			
OCCUPATION						
DESCRIPTION OF IN-KIND CONTRIB	UTION(S)					
CONTRIBUTOR NAME		EMPLOYER NAME				
CONTRIBUTOR ADDRESS	·	EMPLOYER ADDRESS	s			
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD			
OCCUPATION						
DESCRIPTION OF IN-KIND CONTRIBI	JTION(S)					
(COMPLETE THIS LINE FOR EVERY	PAGE USED) TO	TAL, THIS PAGE	\$			
(COMPLETE THIS LINE FOR LAST P	AGE USED) GR	RAND TOTAL	\$			

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

LENDER NAME		EMPLOYER	NAME		
LENDER ADDRESS	<u> </u>	EMPLOYER :	ADDR	FSS	
12.122.11.125.1255		Lim Editer.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	200	
OCCUPATION		ı			· · · · -
					
CO-SIGNER NAME		EMPLOYER	NAME		
		İ			
CO-SIGNER ADDRESS	.	EMPLOYER A	ADDR	ESS	
OCCUPATION		AMOUNT(S)	RECE	IVED THIS PERIOD	
		\$.,,,,,,,,,	
DATE(O) PEOENTED	IA CORECATE AND	1.		-	
DATE(S) RECEIVED	AGGREGATE AMO	UNT		CHECK IF CURRENCY	
	\$			CORRENCT	
LENDER NAME		EMPLOYER I	NAME		-
LEADED ADDRESS					
LENDER ADDRESS		EMPLOYER /	addri	ESS	
			1		
				N.	
OCCUPATION		<u> </u>			
COCOPATION					
CO-SIGNER NAME		EMPLOYER I	VAME		
CO-SIGNER ADDRESS		EMPLOYER A	ADDRI	=88	.
		LIVIII EGITERY	ווטטוו		
OCCUPATION		AMOUNT(S)	RECEI	VED THIS PERIOD	
		F	\L\J.	VED THIS PERIOD	
		\$			
DATE(S) RECEIVED	AGGREGATE AMOU	TNL		CHECK IF CURRENCY	
	 \$			CURRENCY	\
·			_		\
TOTAL AMOUNT OF LOANS BESEIVED	UIC BEDART COS:-	<u> </u>			/
TOTAL AMOUNT OF LOANS RECEIVED T	mis KEPURT PERIO	ָּ			/
			\$		

ADJUSTMENT SCHEDULE

Refund of Contributions

PAYMENT DATE	LETE THIS LINE FOR EVERY PAGE USED) TOTAL, THIS PAGE \$			REFUNDED AMOUNT				
					\$			
				-				
(JOHN LETE IMIS								

SCHEDULE 1(D) - DISBURSEMENTS Campaign Expenses

ADDRESS PURPOSE FULL AMOUNT THIS AMOUNT REPORTING OTHERS OTHERS	4 Control of the cont	TOTAL THIS PAGE	\$ 15 7/4 26 \$
PAYMENT CHECK PAYEE NAME AND ADDRESS PURPOSE NO.	See Attach	(COMPLETE THIS LINE FOR EVERY PAGE LISED)	

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Date	Check No	Purpose	Name	total	address	City
4/23/2018	1219	donation	BHS Baseball PA	250	Bayonne High School	Bayonne
4/23/2018	1220	mail, markerting and cons	Vision Media	24,756.19	854 8th St Secaucus	bayonne
4/23/2018	1221	Raine Cuseglio	Raine Cuseglio	1,500	26 W 5th St	Bayonne
4/23/2018	1222	consulting Fees	Susan Ragheb	2,500	Perrine ave	Jersey City
4/23/2018	1223	data entry	Daniel Beckelman	400	37 Cypress St	Bayonne
4/23/2018	1224	mail, markerting and cons	Vision Media	27,437.84	854 8th St Secaucus	• • • • • • • • • • • • • • • • • • • •
4/23/2018	1225	signs	Vital Signs	2,534.04	485 Ave C	Bayonne
4/26/2018	1230	Fundraiser	Amanda Davila	6,169.90	115 Salem Rd	Burlington
			· -			
Total				65547.97		

Date	debit card	purpose	name	Address	an	nount
4/3/2018	debit	Social media	Facebook	California	\$	153.30
4/6/2018	debit	Social media	Facebook	California	\$	20.00
4/6/2018	debit	postage	US Post Office	Bayonne	\$	181.30
4/10/2018	debit	postage	US Post Office	Jersey City	\$	750.00
4/10/2018	ATM	service fee			\$	1.00
4/13/2018	debit	supplies	Lowes	Bayonne	\$	53.68
4/16/2018	debit	postage	US Post Office	Jersey City	\$	1,200.00
4/16/2018	ATM	service fee			\$	1.00
4/17/2018	debit	supplies paper	Walmart	Bayonne	\$	41.56
4/17/2018	ATM	service fee	<u> </u>		; \$	1.00
4/19/2018	debit	phone	simplemobile	Florida	\$	54.08
4/20/2018	debit	postage	US Post Office	Bayonne	\$:	1,005.00
4/20/2018	ATM	service fee			\$	1.00
4/26/2018	debit	office supplies	Walmart	Bayonne	\$	135.02
4/26/2018	ATM	service fee			\$	1.00
		·				
				:	:	
total		:		<u> </u>	\$:	3,598.94

Date	Check #	Purpose	First Name	Last Name	Pay 4.2 4.8	Address	City
4/9/2018	1174	canvass	Marina	Abdelmelek	\$48.00	25 E 18th St	Bayonne
4/9/2018	1175	canvass	Erick	Alvarado	\$48.00	157 W 32nd St	Bayonne
4/9/2018	1176	canvass	Alexandra	Arana	\$48.00	173 W 21st St	Bayonne
4/9/2018	1177	canvass	Sharina	De Los Santos	\$48.00 a	93 Sanford Pl	Jersey City
4/9/2018	1178	canvass	Julio	Garabito	\$48.00	94 Summit Avenue	Jersey City
4/9/2018	1179	canvass	Alanis	Hernandez	\$48.00	746 JFK Blvd	Bayonne
4/9/2018	1180	canvass	Arianna	Herrera	\$48.00	113 Winfield Avenue	Bayonne
4/9/2018	1181	canvass	Andrew	Kaldas	\$48.00	89 W 25th St	Bayonne
4/9/2018	1182	canvass	Raymond	Machuki	\$48.00	364 Nostrand Ave	Jersey City
4/9/2018	1183	canvass	Meryam	Meawad	\$48.00	45 E 18th St	Bayonne
4/9/2018	1184	canvass	Brian	Minaya	\$48.00	459 Montgomery St	Jersey City
4/9/2018	1185	canvass	David	Morkos	\$48.00	310 Avenue C	Bayonne
4/9/2018	1186	canvass	Merola	Nabeh	\$48.00	139 W 27th St	Bayonne
4/9/2018	1187	canvass	Jazzyln	Nina	\$48.00	732 Avenue E, Unit 203	Bayonne
4/9/2018	1188	canvass	Jaivin	Parikh	\$48.00	6 Bergen Ct	Bayonne
4/9/2018	1189	canvass	Navaah	Real	\$48.00	247 Broadway	Bayonne
4/9/2018	1190	canvass	Patricia	Rivas	\$48.00	80 W 27th St	Bayonne
4/9/2018	1191	canvass	Jose	Rivas-Hernand	\$48.00	80 W 27th St	Bayonne
4/9/2018	1192	canvass	Victoria	Sakowska	\$48.00	14 W 16th St.	Bayonne
4/9/2018	1193	canvass	Andrew	Santiago	\$48.00	28 Avenue C,Apt 14 G	Bayonne
4/9/2018	1194	canvass	Bavle	Sherkawy	\$48.00	1134 Avenue C	Bayonne
4/9/2018	1195	canvass	Jeffery	Veloz	448.00	80 W 27th St	Bayonne
4/9/2018	1196	canvass	Veronica	Youssef		159 W 29th St	Bayonne
4/9/2018	1197	canvass	John	Buckland	7.40	10 Isabella Avenue	Bayonne
4/9/2018	1198	canvass	Anthony	Dominigues	\$84.00	28 Elm Ct	Bayonne
4/9/2018	1199	canvass	Sandra	Bishara	\$96.00	143 Lexington Ave	Bayonne

4/9/2018	1200	canvass	Phoenix	Gourdine	\$96.00	379 Kennedy Blvd	Bayonne
4/9/2018	1201	canvass	Merna	Kaleny	\$96.00	156 W 3rd	Bayonne
4/9/2018	1202	canvass	Joseph	Hanna	\$144.00	121 W 21st St	Bayonne
4/9/2018	1203	canvass	Kaitlyn	Moore	\$144.00	13 E 33rd St.	Bayonne
4/9/2018	1204	canvass	Deborah	Quiles	\$144.00	187 Avenue E	Bayonne
4/9/2018	1205	canvass	Beshoy	Daoud	\$180.00	717 Avenue A	Bayonne
4/9/2018	1206	canvass	Abdelsalam	Fezani	\$180.00	21 West 29th st	Bayonne
4/9/2018	1207	canvass	Hakim	Beshay	\$192,00	129 W 27th St	Bayonne
4/9/2018	1208	canvass	Alexa	Mark	\$96.00	44A W 31st St	Bayonne
4/9/2018	1209	canvass	Hirang	Ranujwala	\$96.00	6 Bergen Ct	Bayonne
4/9/2018	1210	canvass	Erin	Rivera	\$96.00	1114 Kennedy Blvd	Bayonne
4/9/2018	1211	canvass	Liana	Sanchez	\$96.00	131 W 25th st	Bayonne
4/9/2018	1212	canvass	James	Kass	\$100.00	489 Avenue A	Bayonne
4/9/2018	1213	canvass	Mohamed	Benhalima	\$132.00	345A Avenue C	Bayonne
4/9/2018	1214	canvass	Stephany	Bravo	\$132.00	88 West 16th st	Bayonne
4/9/2018	1215	canvass	Lixsi	Vazquez	\$228.00	90 Andrew St	Bayonne
4/9/2018	1216	canvass	Miriam	Bechay	\$246.00	86 W 25th St	Bayonne
4/26/2018	1228	canvass	Ramia	Ibrahim	\$100.00	143 Lexington Ave	Bayonne
			TOTAL		\$3,860,		数型料料

SCHEDULE 2(D) - DISBURSEMENTS
Other

PRO-RATA AMOUNT OTHERS	,			
PR(OT	₩	₩	₩	
PRO-RATA AMOUNT THIS REPORTING ENTITY	₩	€	\$	
FULL AMOUNT	€	\$	\$	
PURPOSE		TOTAL THIS PAGE	GRAND TOTAL	
PAYEE NAME AND ADDRESS		(COMPLETE THIS LINE FOR EVERY PAGE LISED)	(COMPLETE THIS LINE FOR LAST PAGE USED)	
CHECK NO.		S I INF FOR	IS LINE FOR	
PAYMENT DATE		(COMPLETE THE	(COMPLETE TH)	

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

		Contributions made to other Candidates/Committees	ates/Committees	
PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
				S
(COMPLETE THIS LINE FOR EVERY PAGE USED)	E FOR EVERY PA	GE USED)	TOTAL, THIS PAGE	₩
COMPLETE THE FOLLOWING LI SCHEDULE 3(D) GRAND TOTAL	LLOWING LINES F	COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED: SCHEDULE 3(D) GRAND TOTAL		.,
ADD THE "PRO - RAT	TA AMOUNT OTHE	ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)	€	2. &
GRAND TOTAL OF C	ONTRIBUTIONS A	GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES	ES	3, \$

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SCHEDULE E

Outstanding Obligations

Date(s)	Creditor's Name	Address	Description	Amount
				\$
:				
			TOTAL OUTSTANDING	\$
			OUTSTANDING OBLIGATIONS	*

SCHEDULE F Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
					\$
				SCHEDULE F TOTAL	\$

SCHEDULE G Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE				
MAILING ADDRESS	• • • • • • • • • • • • • • • • • • • •			
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY			
CHECK NUMBER	PAYMENT DATE	AMOUNT \$		
NAME OF RECIPIENT CANDIDATE/COMMIT	EE			
MAILING ADDRESS				
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY			
CHECK NUMBER	PAYMENT DATE	AMOUNT \$		
NAME OF RECIPIENT CANDIDATE/COMMIT	TEE			
MAILING ADDRESS				
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY			
CHECK NUMBER NAME OF RECIPIENT CANDIDATE/COMMIT	PAYMENT DATE	\$		
MAILING ADDRESS	TEE			
	ELECTION DISTRICT OR MUNICIPALITY			
CHECK NUMBER NAME OF RECIPIENT CANDIDATE/COMMIT	PAYMENT DATE	\$		
	······································			
MAILING ADDRESS	EL SOTION PIOTEICE OF LIVER AND LIVE			
	ELECTION DISTRICT OR MUNICIPALITY			
CHECK NUMBER	PAYMENT DATE	\$		

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER				
Opening Balance, this (Insert closing balance of insert zero.)	s report last report, or, if this is the first report filed by this entity for this election,	\$		
Funds Transferred fro	om Prior Campaign	<u>\$</u>		
Deposits (Include intere	est)	\$		
Disbursements (Includ	le bank charges)	<u>\$</u>		
Closing Balance, this	Report	\$		
NAME OF BANK OR DE	POSITORY	NAME OF ACCOUNT		
Joseph 1	DeMarco			
NAME OF TREASURER	Colon Ad Bernarlolle NJ	*TELEPHONE NUMBER (DAY)		
	ADDRESS OF TREASURER			
1 april 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CERTIFICATION			
designated by law. I am a	ints on this document are true, and that the contribution amounts recovered that if any of the statements are willfully false, I may be subject to provide the statement of the statement of the contribution of the statement of the contribution of the statement of the contribution are contribution.	eived conform with the limitations		
A & Constitution of the Co	water that it any or the state then is are waiting talse, I may be subject to pi	unishinenc.		
4 26 18	Hary fabel 81 (50Fu	La Pelusa		
DATE PRINT FUIL NAME (CANDIDATE) SIGNATURE (CANDIDATE)				
4/21/18				
THE COLL	STATE OF MANY CONDIDATES	UPE (SAMPIPATE)		
DATE PRINT FULL NAME (CANDIDATE) SIGNATURE (CANDIDATE)				
912118	Thomas S. Cottle Thom	cos /celles		
DATE	PRINT FULL NAME (CANDIDATE) SIGNAT	DRE (CANDIDATE)		
1/2/18	1 Toron hollowh.			
7/0/6//0 DATE	PRINT FULL NAME (TREASURER) SIGNAT	UNE (TREACURER)		
DAIL	PRINT FULL MAINE (TREASURER) SIGNATI	URE (TREASURER)		
	rial and Legislative candidates are required to receive training with the Ne . Check here if you have completed the training and enter your Treasu			
	DECLARATION OF FINAL REPORT			
If this is the final report sig	gn applicable Declaration below as well as Certification above. Chapter 6	5 of the Laure of 1002 services		
that all filing entities contin	nue to file reports with the Commission until all campaign business is wou	and up and the fund is dissolved.		
I certify that all contrib loans or other obligation	utions or other monies received by this election fund have been disbursed ons, and that the election fund has wound up its business and has been o	d, that there are no outstanding dissolved.		
DÄTE	PRINT FULL NAME (CANDIDATE) SIGNAT	URE (CANDIDATE)		
DATE	PRINT FULL NAME (CANDIDATE) SIGNAT	URE (CANDIDATE)		
DATE	PRINT FULL NAME (CANDIDATE) SIGNAT	URE (CANDIDATE)		
DATE	PRINT FULL NAME (TREASURER) SIGNATI	URE (TREASURER)		

New Jersey Election Law Enforcement Commission

11

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*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER					
Opening Balance, this (Insert closing balance of insert zero.)	s report last report, or, if this is the first report filed by this entity for this election	s 48,080.75			
Funds Transferred fro	om Prior Campaign	\$			
Deposits (Include intere	est)	s 82,92500			
Disbursements (Include	e bank charges)	s 73,012.91			
Closing Balance, this	Report	\$57,992.84			
NAME OF BANK OR DEF	thonal bank	Team Davis 2018 NAME OF ACCOUNT			
522	7 h 2 m m				
NAME OF TREASURER	Marro	*TELEPHONE NÜMBED /DAV			
NAME OF TREASURER 59 Old Colon Rd Bornwelsult, NJ 07924 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.					
4/27/2018	Salvatore Gullace Sel	Are Colle			
U DATE 18	PRINT FULL NAME (CANDIDATE) SIGN	ATURE (CANDIDATE)			
DATE	PRINT FULL NAME (CANDIDATE) SIGN	ATURE (CAMDIDATE)			
DATE	PRINT FULL NAME (CANDIDATE) SIGN	ATURE (CANDIDATE)			
DATE	PRINT FULL NAME (TREASURER) SIGNA	ATURE (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 filling 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) SIGN	ATURE (CANDIDATE)			
DATE	PRINT FULL NAME (CANDIDATE) SIGN	ATURE (CANDIDATE)			
DATE	PRINT FULL NAME (CANDIDATE) SIGN.	ATURE (CANDIDATE)			
DATE	PRINT FULL NAME (TREASURER) SIGNA	ATURE (TREASURER)			

New Jersey Election Law Enforcement Commission

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*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.