

RECEIPTS AND EXPENDITURES QUARTERLY REPORT

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P.O. BOX 185, TRENTON, NJ 08626-0185

PLEASE TYPE OR PRINT

COMMITTEE NAME OR APPROVED ACRONYM

UNION CITY FIRST, INC

ADDRESS (number and street)

☐

CHECK IF DIFFERENT THAN PREVIOUSLY REPORTED

P.O. BOX 873

CITY, STATE AND ZIP CODE

UNION CITY, NEW JERSEY 07087

COMMITTEE TYPE

☐

CPC

☒

PPC

☐

LLC

CHECK IF:

☐

AMENDMENT

☐

FIRST REPORT FILED

ELEC IDENTIFICATION NUMBER

H 0916000111Q2018

ELEC RECEIVED**APR 17 2018**☒

APR

15

☐

JUL

15

☐

OCT

15

☐

JAN

15

YEAR 2018

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

DEPOSITORY INFORMATION

FROM

THROUGH

PERIOD COVERED

01/01/2018

03/31/2018

COLUMN A

THIS REPORT

COLUMN B

CALENDAR

YEAR-TO-DATE

1. CASH ON HAND, JANUARY 1, 2018

1,509.26

2. CASH ON HAND, BEGINNING OF REPORTING PERIOD

1,509.26

3. MONETARY RECEIPTS

(+) 432,723.00

432,723.00

4. SUBTOTAL

434,232.26

434,232.26

5. MONETARY EXPENDITURES

(-) 387,446.55

387,446.55

6. CASH ON HAND, CLOSE OF REPORTING

46,785.71

46,785.71

NET FINANCIAL SUMMARY

7 CASH ON HAND, CLOSE OF REPORTING PERIOD

46,785.71

8. DEBT OWED TO COMMITTEE

(+)

0.00

9. SUBTOTAL

46,785.71

10. DEBT OWED BY COMMITTEE

(-)

158,695.00

11. TOTAL (Net Worth)

(111,909.29)

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.

4/15/18

DATE

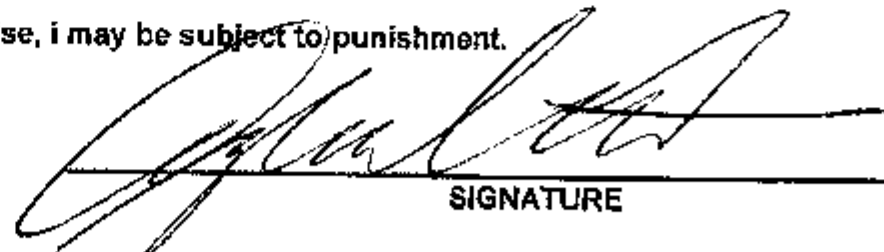
ANGELO CALIENTE

PRINT NAME

103 POPLAR AVENUE

ADDRESS

POMPTON LAKES, NJ 07442



SIGNATURE

973-632-5858

*(AREA CODE) DAY TELEPHONE NUMBER

973-632-5858

*(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
			THIS REPORT	CALENDAR YEAR-TO-DATE
		MONETARY RECEIPTS		
1		CONTRIBUTIONS, \$300 OR LESS	175,363.00	175,363.00
2		CONTRIBUTIONS, MORE THAN \$300	257,360.00	257,360.00
3		TOTAL (Add lines 1 and 2)	432,723.00	432,723.00
4		REFUND OF EXCESS CONTRIBUTIONS (ADJUSTMENT SCHEDULE) (-)	0.00	0.00
5		SUBTOTAL (Subtract line 4 from line 3)	432,723.00	432,723.00
		OTHER RECEIPTS		
6		REIMBURSEMENTS / REFUNDS	0.00	0.00
7		DIVIDENDS / INTEREST	0.00	0.00
8		LOANS RECEIVED BY COMMITTEE, \$300 OR LESS	0.00	0.00
9		LOANS RECEIVED BY COMMITTEE, MORE THAN \$300	0.00	0.00
10		TOTAL MONETARY RECEIPTS (Add lines 5 through 9)	432,723.00	432,723.00
11		IN-KIND CONTRIBUTIONS, \$300 OR LESS	0.00	0.00
12		IN-KIND CONTRIBUTIONS, MORE THAN \$300	0.00	0.00
13		GROSS RECEIPTS (Add lines 10,11 and 12)	432,723.00	432,723.00
TABLE II EXPENDITURES				
14		OPERATING DISBURSEMENTS	353,046.55	353,046.55
		CONTRIBUTIONS (FROM THIS COMMITTEE) TO:		
15	a.	NJ GUBERNATORIAL CANDIDATES / COMMITTEES	0.00	0.00
	b.	NJ LEGISLATIVE CANDIDATES / COMMITTEES	0.00	0.00
	c.	ALL OTHER CANDIDATES / COMMITTEES	0.00	0.00
		EXPENDITURES MADE ON BEHALF OF:		
16	a.	NJ GUBERNATORIAL CANDIDATES / COMMITTEES	0.00	0.00
	b.	NJ LEGISLATIVE CANDIDATES / COMMITTEES	0.00	0.00
	c.	ALL OTHER CANDIDATES / COMMITTEES	34,400.00	34,400.00
17		LOAN PAYMENTS	0.00	0.00
18		TOTAL MONETARY EXPENDITURES (Add lines 14 through 17)	387,446.55	387,446.55
19		IN-KIND CONTRIBUTIONS, \$300 OR LESS	0.00	0.00
20		IN-KIND CONTRIBUTIONS, MORE THAN \$300	0.00	0.00
21		GROSS EXPENDITURES (Add lines 18 through and 20)	387,446.55	387,446.55

DEPOSITORY SUMMARY

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

COMMITTEE NAME: **UNION CITY FIRST, INC.**

BANK ACCOUNT INFORMATION

1. NAME OF BANK VALLEY NATIONAL BANK		(AREA CODE) TELEPHONE NUMBER	
MAILING ADDRESS 20 - 24 FAIRLAWN AVENUE			
CITY, STATE, ZIP CODE FAIRLAWN, NJ 07410			
ACCOUNT NAME UNION CITY FIRST, INC		ACCOUNT NUMBER 41543181	
OPENING BALANCE THIS PERIOD 1,358.14	DEPOSITS THIS PERIOD 432,723.00	DISBURSEMENTS THIS PERIOD 387,446.55	CLOSING BALANCE THIS PERIOD 46,634.59

If the committee has more than one bank account within the same bank, the name(s) and account number(s) of the additional account(s) must be provided.

ACCOUNT NAME		ACCOUNT NUMBER	
OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD

2. NAME OF BANK		(AREA CODE) TELEPHONE NUMBER	
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
ACCOUNT NAME		ACCOUNT NUMBER	
OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD

If the committee has more than one bank account within the same bank, the name(s) and account number(s) of the additional account(s) must be provided.

ACCOUNT NAME		ACCOUNT NUMBER	
OPENING BALANCE THIS PERIOD	DEPOSITS THIS PERIOD	DISBURSEMENTS THIS PERIOD	CLOSING BALANCE THIS PERIOD

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, contact the Commission.

1. NAME OF DEPOSITORY OR ISSUER		(AREA CODE) TELEPHONE NUMBER	
MAILING ADDRESS			
CITY, STATE, ZIP CODE			
ACCOUNT NAME		ACCOUNT NUMBER	
TYPE OF ASSET <input type="checkbox"/> MONEY MARKET <input type="checkbox"/> C. D. <input type="checkbox"/> MUTUAL FUND <input type="checkbox"/> BONDS <input type="checkbox"/> STOCKS <input type="checkbox"/> 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

DEPOSITORY SUMMARY

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

COMMITTEE NAME: UNION CITY FIRST, INC.

BANK ACCOUNT INFORMATION

1. NAME OF BANK

ORITANI SAVINGS BANK

(AREA CODE) TELEPHONE NUMBER
(201) 330-2422

MAILING ADDRESS

370 PASCACK ROAD

CITY, STATE, ZIP CODE

WASHINGTON TOWNSHIP, NJ 07676

ACCOUNT NAME

UNION CITY FIRST, INC.

ACCOUNT NUMBER
032-900123-4

OPENING BALANCE THIS PERIOD
151.12

DEPOSITS THIS PERIOD
0.00

DISBURSEMENTS THIS PERIOD
0.00

CLOSING BALANCE THIS PERIOD
151.12

If the committee has more than one bank account within the same bank, the name(s) and account number(s) of the additional account(s) must be provided.

ACCOUNT NAME

ACCOUNT NUMBER

OPENING BALANCE THIS PERIOD

DEPOSITS THIS PERIOD

DISBURSEMENTS THIS PERIOD

CLOSING BALANCE THIS PERIOD

2. NAME OF BANK

(AREA CODE) TELEPHONE NUMBER

MAILING ADDRESS

CITY, STATE, ZIP CODE

ACCOUNT NAME

ACCOUNT NUMBER

OPENING BALANCE THIS PERIOD

DEPOSITS THIS PERIOD

DISBURSEMENTS THIS PERIOD

CLOSING BALANCE THIS PERIOD

If the committee has more than one bank account within the same bank, the name(s) and account number(s) of the additional account(s) must be provided.

ACCOUNT NAME

ACCOUNT NUMBER

OPENING BALANCE THIS PERIOD

DEPOSITS THIS PERIOD

DISBURSEMENTS THIS PERIOD

CLOSING BALANCE THIS PERIOD

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

☐ Bonds

☐ Certificate of Deposit (C. D.)

☐ Stocks

☐ Mutual Fund Account

☐ Real Property

☐ Other (please specify) _____

For each item checked ("X") above (other than real property), please complete the following information. If real property is held, contact the Commission.

1. NAME OF DEPOSITORY OR ISSUER

(AREA CODE) TELEPHONE NUMBER

MAILING ADDRESS

CITY, STATE, ZIP CODE

ACCOUNT NAME

ACCOUNT NUMBER

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

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 1 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME NELSON LOPEZ		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 528 26TH STREET #1A
OCCUPATION REAL ESTATE		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME 17TH & WEST STREET LLC		DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 4,800.00
EMPLOYER ADDRESS (NUMBER AND STREET) 528 - 26TH STREET SUITE 1A			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 4,800.00	
CONTRIBUTOR NAME AIM INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3 CRESCENT CT
OCCUPATION REAL ESTATE		STATE USE ONLY	(CITY, STATE AND ZIP CODE) FORT LEE, NJ 07024
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/9/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00	
CONTRIBUTOR NAME ALDIN TRANSPORTATION INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 541-543 TOTOWA AVE
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) PATERSON, NJ 07522
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/16/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	
CONTRIBUTOR NAME ALEJANDRO VELAZQUEZ		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 300 45TH ST 9G
OCCUPATION HEALTH DEPARTMENT		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07107
EMPLOYER NAME CITY OF UNION CITY		DATE(S) RECEIVED THIS PERIOD 3/13/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00	
1. SUBTOTAL (Add all receipts listed on this page)			7,300.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

2 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME ALEXANDER DIAZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 416 CUPSAN DRIVE	DATE(S) RECEIVED THIS PERIOD 3/13/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION DIRECTOR OF OUTREACH PROGRAMS	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RINGWOOD, NJ 07456		
EMPLOYER NAME GERGEN TAC				
EMPLOYER ADDRESS (NUMBER AND STREET) 416 CUPSAN DRIVE				
(CITY, STATE AND ZIP CODE) RINGWOOD, NJ 07456			AGGREGATE YEAR-TO-DATE 600.00	
RECEIPT DESCRIPTION (IF IN-KIND)				

CONTRIBUTOR NAME ALEXIS TAVARES	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4705 BERGEN LINE AVE #2	DATE(S) RECEIVED THIS PERIOD 2/27/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UC HIGH SCHOOL				
EMPLOYER ADDRESS (NUMBER AND STREET) 2500 John Fitzgerald Kennedy Blvd				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			AGGREGATE YEAR-TO-DATE 400.00	
RECEIPT DESCRIPTION (IF IN-KIND)				

CONTRIBUTOR NAME ALI M JALUD	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 230 72 ST	DATE(S) RECEIVED THIS PERIOD 2/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 350.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEST BERGEN, NJ 07047		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			AGGREGATE YEAR-TO-DATE 350.00	
RECEIPT DESCRIPTION (IF IN-KIND)				

CONTRIBUTOR NAME ALPHABETS INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1619 WEST ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)			AGGREGATE YEAR-TO-DATE 500.00	
RECEIPT DESCRIPTION (IF IN-KIND)				
1. SUBTOTAL (Add all receipts listed on this page)				1,850.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 3 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME AMERICAN FIRE & SAFETY EQUIP CO INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) PO BOX 3048
OCCUPATION FIRE EQUIPMENT TECH		STATE USE ONLY	(CITY, STATE AND ZIP CODE) GUTTENBERG, NJ 07093
EMPLOYER NAME AMERICAN FIRE & SAFETY EQUIP CO INC		DATE(S) RECEIVED THIS PERIOD 2/23/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) PO BOX 3048			
(CITY, STATE AND ZIP CODE) GUTTENBERG, NJ 07093			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME ANA FESTA		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 16 COTTAGE AVE
OCCUPATION ADMINISTRATOR		STATE USE ONLY	(CITY, STATE AND ZIP CODE) MONTALVE, NJ 07645
EMPLOYER NAME CITY OF UNION CITY		DATE(S) RECEIVED THIS PERIOD 3/17/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,500.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,500.00	
CONTRIBUTOR NAME ANA VALLE		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 138 CHRISTIE
OCCUPATION SUPERVISOR		STATE USE ONLY	(CITY, STATE AND ZIP CODE) RIDGEFIELD, NJ 07657
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00	
CONTRIBUTOR NAME ANA YGLESIAS-LIBERATORE		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 43 DUER PLACE WEE
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00	
1. SUBTOTAL (Add all receipts listed on this page)			4,750.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 4 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME ANDY GARCIA		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 216 NORTH STREET
OCCUPATION SELF EMPLOYED		STATE USE ONLY	(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307
EMPLOYER NAME JEG ENTERPRISES			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 800 KENNEDY BLDV			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	2/13/2018 1,250.00
CONTRIBUTOR NAME ANGELA OTTOMANELLO-MEDINA		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 317 6TH ST
OCCUPATION SUPERVISOR		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07088
EMPLOYER NAME UCBOE			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,200.00	2/28/2018 1,200.00
CONTRIBUTOR NAME ANGELO SERVIDIO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 600 HARBOR BLDV UNIT 1077
OCCUPATION ATTORNEY		STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEEHAWKEN, NJ 07086
EMPLOYER NAME ANGELO SERVIDIO ATTORNEY AT LAW			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 405 CENTRE ST			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) NUTLEY, NJ 07110			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 5,000.00	3/3/2018 5,000.00
CONTRIBUTOR NAME ANNETTE CHAPARRO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) PO BOX 610
OCCUPATION ASSEMBLYWOMAN		STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030
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 1,250.00	3/22/2018 1,250.00
1. SUBTOTAL (Add all receipts listed on this page)			8,700.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 5 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME ANNETTE KAPLAN		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
OCCUPATION PRINCIPAL		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07090
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	
CONTRIBUTOR NAME ANTHONY FELIX		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 121 DODD ST
OCCUPATION MANAGER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEBHAWKEN, NJ 07086
EMPLOYER NAME ART 2 INK		DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 2295 A POWELL BLVD			
(CITY, STATE AND ZIP CODE) NEW YORK, NY 10030			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME ANTHONY SNARSKI		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1223 BERGENLINE AVE
OCCUPATION ASSISTANT PRINCIPAL		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME ANTONIO IBARRIA		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 6050 BLVD EAST APT 5G
OCCUPATION OWNER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEST NEW YORK, NJ 07093
EMPLOYER NAME USA DISTRIBUTORS INC. DBA EL ESPECIAL		DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 3,000.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3711 HUDSON AVENUE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 3,000.00	
1. SUBTOTAL (Add all receipts listed on this page)			6,000.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

6 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME ANTONIO PEREZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 408 43RD ST
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE)		2/28/2018
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 800.00	800.00

CONTRIBUTOR NAME ARCHER CUELLAR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 10 BENNETT AVE
OCCUPATION POLICE OFFICER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) ROCHELLE PARK, NJ 07662
EMPLOYER NAME UNION CITY POLICE		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		3/22/2018
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00	500.00

CONTRIBUTOR NAME FRED GOLDEN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3320 ROUTE 66
OCCUPATION OWNER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NEPTUNE, NJ 07753
EMPLOYER NAME AUTOMATED BUILDING CONTROLS, INC		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3320 RUOTE 66		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) NEPTUNE, NJ 07753		2/15/2018
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 5,000.00	5,000.00

CONTRIBUTOR NAME BAGG INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 910 NEW YORK AVE
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07098
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE)		3/10/2018
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 900.00	900.00

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

7,200.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

7 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME BARBARA MCNERNEY	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 40 E 35ST	DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) BAYONNE, NJ 07002		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME BETH NISKANEN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 809 22ND ST APT 801	DATE(S) RECEIVED THIS PERIOD 3/2/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION REAL ESTATE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07095		
EMPLOYER NAME BASAD MANAGEMENT LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) PO BOX 5200 (CITY, STATE AND ZIP CODE) WEEHAWKEN, NJ 07086				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME BETH NISKANEN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 809 22ND ST APT 801	DATE(S) RECEIVED THIS PERIOD 3/16/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION REAL ESTATE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07095		
EMPLOYER NAME BASAD MANAGEMENT LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) PO BOX 5200 (CITY, STATE AND ZIP CODE) WEEHAWKEN, NJ 07086				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME BETSY RODRIGUEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 130 45TH ST #3	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07124		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

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

3,600.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 8 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME BRAD GINKEL	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 9 HIGHWAY TERR	
OCCUPATION SELF EMPLOYED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) MONTCLAIR, NJ 07042	
EMPLOYER NAME HOBOKEN FARMS		DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
EMPLOYER ADDRESS (NUMBER AND STREET) 314 ELLFAX AVE			
(CITY, STATE AND ZIP CODE) CLIFTON, NJ 07013			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	
CONTRIBUTOR NAME BRIAN WOLPERT	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 375 WEBSTER DR	
OCCUPATION NEW MILFORD, NJ	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07098	
EMPLOYER NAME UNION CITY POLICE		DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME BUCKET PETERSON GLOBAL INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 145 N FRANKLIN TURNPIKE SUITE 312	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RAMSEY, NJ 07446	
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	
CONTRIBUTOR NAME CAONABO REYES	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 489 OAK ST	
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RIDGEFIELD, NJ 07657	
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/14/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 1800 SUMMIT			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
1. SUBTOTAL (Add all receipts listed on this page)			3,600.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 9 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME CAREPOINT INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 10 EXCHANGE PLACE 15TH FLOOR
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	
CONTRIBUTOR NAME CARMEN LUGO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 163 19TH STREET
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/11/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	
CONTRIBUTOR NAME CARMEN MACHADO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 145 PALISADES AVE
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) EMERSON, NJ
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,100.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,100.00	
CONTRIBUTOR NAME FREIDA MANITO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 324 55TH STREET
OCCUPATION OWNER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEST NEW YORK, NJ 07093
EMPLOYER NAME SENIORS COUNT LLC DBA CASA MANITO		DATE(S) RECEIVED THIS PERIOD 3/1/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
EMPLOYER ADDRESS (NUMBER AND STREET) 5500 PALISADE AVE			
(CITY, STATE AND ZIP CODE) WEST NEW YORK, NJ 07093			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	
1. SUBTOTAL (Add all receipts listed on this page)			2,800.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 10 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME CATALINA TAMARGO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 13 LINCOLN PLACE	DATE(S) RECEIVED THIS PERIOD 3/14/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION EDUCATOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) MOONACHIE, NJ 07024		
EMPLOYER NAME UCBOE	EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME CATHERINE KIRBY	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 57 MANTO AVE	DATE(S) RECEIVED THIS PERIOD 3/1/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) OAKLAND, NJ 07436		
EMPLOYER NAME UCBOE	EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME CHRISTIAN BASTIDAS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 306 7TH STREET	DATE(S) RECEIVED THIS PERIOD 3/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,500.00
OCCUPATION REAL ESTATE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07118		
EMPLOYER NAME BASTIDAS & ASSOCIATES LLC	EMPLOYER ADDRESS (NUMBER AND STREET) 306 7TH ST (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,500.00		

CONTRIBUTOR NAME CHRISTIAN YEGEN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 31 BERGEN DRIVE	DATE(S) RECEIVED THIS PERIOD 2/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION DEVELOPER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CEDAR GROVE, NJ 07009		
EMPLOYER NAME CHRISTIAN YEGEN	EMPLOYER ADDRESS (NUMBER AND STREET) 31 BERGEN DRIVE (CITY, STATE AND ZIP CODE) CEDAR GROVE, NJ 07009			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00		

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

4,600.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

11 of 54

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

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

☒MONETARY
CONTRIBUTIONS☐IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME CHRISTOPHER CRISPINO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 248 EAST ARTHUR	DATE(S) RECEIVED THIS PERIOD 2/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) ISELIN, NJ 08830		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME DINO CLEMENTE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 120 LEUNING ST	DATE(S) RECEIVED THIS PERIOD 3/2/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION CATERER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SOUTH HACKENSACK, NJ 07606		
EMPLOYER NAME CLEMENTE BAKERY				
EMPLOYER ADDRESS (NUMBER AND STREET) 120 LEUNING ST (CITY, STATE AND ZIP CODE) SOUTH HACKENSACK, NJ 07606				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME GIDO VASQUEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 57 LINCOLN AVE	DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 750.00
OCCUPATION PAVING CONTRACTOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CLIFFSIDE PARK, NJ 07010		
EMPLOYER NAME CLIFFSIDE PAVING LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 57 LINCOLN AVE (CITY, STATE AND ZIP CODE) CLIFFSIDE PARK, NJ 07010				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 750.00			

CONTRIBUTOR NAME COMPASSIONATE CARE RESEARCH INSTITUTE INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 950 US HIGHWAY 1 NORTH	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 7,200.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WOODBIDGE, NJ 07095		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 7,200.00			
1. SUBTOTAL (Add all receipts listed on this page)				10,450.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

12 of 54

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

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

X

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME

CRESPO & COMPANY INC

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

5115 BERGENLINE AVE

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

WEST NEW YORK, NJ 07093

EMPLOYER NAME

EMPLOYER ADDRESS (NUMBER AND STREET)

(CITY, STATE AND ZIP CODE)

RECEIPT DESCRIPTION (IF IN-KIND)

DATE(S) RECEIVED
THIS PERIOD

3/15/2018

AMOUNT(S) RECEIVED
THIS PERIOD

2,500.00

AGGREGATE YEAR-TO-DATE
2,500.00

CONTRIBUTOR NAME

DANIEL CHOI

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

32 TRINITY PL

OCCUPATION

DEVELOPER

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

EAST HANOVER, NJ 07936

EMPLOYER NAME

DANIEL CHOI

EMPLOYER ADDRESS (NUMBER AND STREET)

32 TRINITY PL

(CITY, STATE AND ZIP CODE)

EAST HANOVER, NJ 07936

RECEIPT DESCRIPTION (IF IN-KIND)

DATE(S) RECEIVED
THIS PERIOD

3/11/2018

AMOUNT(S) RECEIVED
THIS PERIOD

1,250.00

AGGREGATE YEAR-TO-DATE
1,250.00

CONTRIBUTOR NAME

DANIEL DIORIO

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

PO BOX 576

OCCUPATION

VERIFICATION OFFICER

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

EMPLOYER NAME

UCBOE

EMPLOYER ADDRESS (NUMBER AND STREET)

3913 BERGEN TURNPIKE

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

RECEIPT DESCRIPTION (IF IN-KIND)

DATE(S) RECEIVED
THIS PERIOD

2/27/2018

AMOUNT(S) RECEIVED
THIS PERIOD

2,500.00

AGGREGATE YEAR-TO-DATE
2,500.00

CONTRIBUTOR NAME

DANIEL PEER

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

341 LINCOLN AVE

OCCUPATION

CORRECTION OFFICER

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

LYNDHURST, NJ 07072

EMPLOYER NAME

HUDSON COUNTY

EMPLOYER ADDRESS (NUMBER AND STREET)

35 HACKENSACK AVE

(CITY, STATE AND ZIP CODE)

KEARNY, NJ 07022

RECEIPT DESCRIPTION (IF IN-KIND)

DATE(S) RECEIVED
THIS PERIOD

3/11/2018

AMOUNT(S) RECEIVED
THIS PERIOD

1,250.00

AGGREGATE YEAR-TO-DATE
1,250.00

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

7,500.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

13 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME DANIELA RICA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 149 CAROLINE RD	DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 550.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) PARAMUS, NJ 07652		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 550.00			

CONTRIBUTOR NAME DAVID CHASMER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 189 BEECH ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION POLICE SERGEANT	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NUTLEY, NJ 07110		
EMPLOYER NAME UNION CITY POLICE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME DAVID DUNLAY	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 77 BEECH ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION POLICE OFFICER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NUTLEY, NJ 07110		
EMPLOYER NAME UNION CITY POLICE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME DAVID ROBERTS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 618 HUDSON ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION ATTORNEY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030		
EMPLOYER NAME DAVID ROBERTS				
EMPLOYER ADDRESS (NUMBER AND STREET) 618 HUDSON ST (CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			
1. SUBTOTAL (Add all receipts listed on this page)				3,000.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

14 of 54

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

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

☒MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME DELIA MENENDEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 10 MADISON AVE	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SUPERVISION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) KEARNY, NJ 07032		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME DELL AUTO STORAGE INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1425 UNION TPKE	DATE(S) RECEIVED THIS PERIOD 2/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME DENTISMILES INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 2200 NEW YORK AVE	DATE(S) RECEIVED THIS PERIOD 3/9/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07111		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME DERICK VALERA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 803 22ND ST APT #11	DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
OCCUPATION DEAN OF STUDENTS	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07097		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 900.00		
1. SUBTOTAL (Add all receipts listed on this page)				4,650.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

15 of 54

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

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

X

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MOHAMAD CHAUDHRY	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3807 BERGENLINE AVE (CITY, STATE AND ZIP CODE) UNION CITY, 07087	DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION DOCTOR	STATE USE ONLY			
EMPLOYER NAME DILIGENT MEDICAL CARE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3807 BERGENLINE AVENUE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME DOMINICK LUNANOVA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 517 PARK AVE (CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030	DATE(S) RECEIVED THIS PERIOD 2/27/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION BUILDING INSPECTOR	STATE USE ONLY			
EMPLOYER NAME CITY OF HOBOKEN				
EMPLOYER ADDRESS (NUMBER AND STREET) 94 WASHINGTON AVE (CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME ROBERTO MOREIRO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3300 BERGENLINE AVENUE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,000.00
OCCUPATION RESTAURANT OWNER	STATE USE ONLY			
EMPLOYER NAME DON LUIS RESTAURANT				
EMPLOYER ADDRESS (NUMBER AND STREET) 330 BERGENLINE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07124				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,000.00			

CONTRIBUTOR NAME ED FARMER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 60 COLUMBIA RD (CITY, STATE AND ZIP CODE) MORRISTOWN, NJ 07960	DATE(S) RECEIVED THIS PERIOD 2/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SELF EMPLOYED	STATE USE ONLY			
EMPLOYER NAME MILLENNIUM STRATEGIES				
EMPLOYER ADDRESS (NUMBER AND STREET) 60 COLUMBIA RD (CITY, STATE AND ZIP CODE) MORRISTOWN, NJ 07960				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

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

5,100.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

16 of 54

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

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

X

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

EDWIN MARTINEZ

137 PIERRE AVE

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

VICE PRINCIPAL

GARFIELD, NJ

EMPLOYER NAME

UCBOE

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

3912 BERGEN TURNPIKE

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

3/22/2018

1,200.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

1,200.00

CONTRIBUTOR NAME

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

VICTOR BLAS

4500 BERGENLINE AVENUE

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

STORE OWNER

UNION CITY, NJ 07087

EMPLOYER NAME

EL WATERLOO

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

4500 BERGENLINE AVE

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

3/19/2018

1,000.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

1,000.00

CONTRIBUTOR NAME

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

ELECTION FUND OF ASSEMBLYMAN RAJ MUKHERI

PO BOX 1

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

EMPLOYER NAME

JERSEY CITY, NJ 07303

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

(CITY, STATE AND ZIP CODE)

3/22/2018

7,200.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

7,200.00

CONTRIBUTOR NAME

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

ELECTION FUND OF STEVEN FULOP

PO BOX 3399

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

EMPLOYER NAME

JERSEY CITY, NJ 07307

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

(CITY, STATE AND ZIP CODE)

JERSEY CITY, NJ 07307

3/22/2018

1,250.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

1,250.00

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

10,650.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 17 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
ELECTION FUND OF WILLIAM O'DEA			444 WEST SIDE AVE
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE)
			JERSEY CITY, NJ 07307
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		2/16/2018	600.00
(CITY, STATE AND ZIP CODE)			
JERSEY CITY, NJ 07307			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE	
		600.00	
CONTRIBUTOR NAME		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
ELIZABETH LYDECKER			219 39TH ST
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE)
EXC DRIVER			UNION CITY, NJ 07108
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		3/13/2018	600.00
3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE)			
UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE	
		600.00	
CONTRIBUTOR NAME		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
ELKE VOIGT			39-10 PELLINGTON DR
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE)
POOL DIRECTOR			FAIR LAWN, NJ 07410
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		2/23/2018	900.00
500 WEST STREET			
(CITY, STATE AND ZIP CODE)			
UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE	
		900.00	
CONTRIBUTOR NAME		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET)
ERNESTO GARCIA			100 MANHATTAN AVENUE
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE)
EDUCATOR			UNION CITY, NJ 07108
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD	AMOUNT(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET)		3/22/2018	600.00
3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE)			
UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE	
		600.00	
1. SUBTOTAL (Add all receipts listed on this page)			2,700.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

18 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME ESMERALDA DORESTE-ROMAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 817- 19TH ST	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION DIRECTOR OF ADULT EDUCATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME FELIX MENDELSON	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 222 JO DRIVE	DATE(S) RECEIVED THIS PERIOD 2/7/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION REAL ESTATE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LOS GATOS, CA 95032		
EMPLOYER NAME CENTRAL HOTEL LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 413-417 38TH STREET (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME FLIA VERAS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 227 48 TH ST	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
OCCUPATION CUSTODIAN	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 400.00			

CONTRIBUTOR NAME FRANK DE LA SOTO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4901 BORADWAY AVE	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,200.00
OCCUPATION WATER PURIFICATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07123		
EMPLOYER NAME A1 PURIFIED WATER LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 4901 BORADWAY AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07123				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,200.00			

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

4,100.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 19 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE 'SCHEDULE A' FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME FREDRICK HURTADO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 260 PROSPECT AVE 865
OCCUPATION SUPERVISOR		STATE USE ONLY	(CITY, STATE AND ZIP CODE) HACKENSACK, NJ 07601
EMPLOYER NAME UCBOE			
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/22/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
CONTRIBUTOR NAME GAIL RENGEL		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 523 35TH ST
OCCUPATION ATTORNEY		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME GAIL RENGEL			
EMPLOYER ADDRESS (NUMBER AND STREET) 523 35TH ST			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	DATE(S) RECEIVED THIS PERIOD 2/27/2018 AMOUNT(S) RECEIVED THIS PERIOD 500.00
CONTRIBUTOR NAME GANESH SWAMI INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 710 SUMMIT AVE
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME			
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	DATE(S) RECEIVED THIS PERIOD 3/22/2018 AMOUNT(S) RECEIVED THIS PERIOD 600.00
CONTRIBUTOR NAME GAUTAM SAGI		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1427 GRAND STREET
OCCUPATION CONSTRUCTION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030
EMPLOYER NAME GREEN REALTY LLC			
EMPLOYER ADDRESS (NUMBER AND STREET) 1410 PALISADE AVE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 2,500.00	DATE(S) RECEIVED THIS PERIOD 2/19/2018 AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
1. SUBTOTAL (Add all receipts listed on this page)			4,850.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 20 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME GERALDINE PEREZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1910 PALISADE AVE	
OCCUPATION PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME GERARDO TAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 279 GRACE AVE	
OCCUPATION DEVELOPER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094	
EMPLOYER NAME GERARDO TAN		DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
EMPLOYER ADDRESS (NUMBER AND STREET) 279 GRACE AVE			
(CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	
CONTRIBUTOR NAME GINELLA INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 2308 BERGENLINE AVE	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 550.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 550.00	
CONTRIBUTOR NAME RAMON M. GONZALEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 545-547 39TH ST. SUITE100	
OCCUPATION ATTORNEY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	
EMPLOYER NAME GONZALEZ Y CARIDE ESQS		DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 545-547 39TH ST			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
1.SUBTOTAL (Add all receipts listed on this page)			3,650.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 21 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME H&M FOOD OF NJ CORP		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 601 4TH STREET
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 2/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME HELEN BRZOZOWSKI		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 917 SUMMIT AVE
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07089
EMPLOYER NAME UCBOE		DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 2,500.00	
CONTRIBUTOR NAME HOBOKEN LOCK AND SUPPLY INC		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 624 WASHINGTON ST
OCCUPATION		STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	
CONTRIBUTOR NAME IAN E NUNEZ		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1614 HAMILTON ST
OCCUPATION POLICE OFFICER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) BELLEVILLE, NJ 07109
EMPLOYER NAME UNION CITY POLICE		DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	
1. SUBTOTAL (Add all receipts listed on this page)			5,600.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 22 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME IGNACIO LUIS WUST		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 293 GRACE AVE
OCCUPATION DEVELOPER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094
EMPLOYER NAME SELF EMPLOYED			
EMPLOYER ADDRESS (NUMBER AND STREET) 293 GRACE AVE			
(CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 2,500.00	DATE(S) RECEIVED THIS PERIOD 3/13/2018 AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
CONTRIBUTOR NAME LAWRENCE R. INSERRA JR.		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 20 RIDGE ROAD
OCCUPATION SUPERMARKET EXECUTIVE		STATE USE ONLY	(CITY, STATE AND ZIP CODE) MAHWAH, NJ 07430
EMPLOYER NAME INSERRA SUPERMARKETS			
EMPLOYER ADDRESS (NUMBER AND STREET) 2 RIDGE ROAD			
(CITY, STATE AND ZIP CODE) MAHWAH, NJ 07430			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	DATE(S) RECEIVED THIS PERIOD 2/7/2018 AMOUNT(S) RECEIVED THIS PERIOD 500.00
CONTRIBUTOR NAME IRMA ARENCIBIA		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4545 PALISADE AVE
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE			
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 400.00	DATE(S) RECEIVED THIS PERIOD 3/8/2018 AMOUNT(S) RECEIVED THIS PERIOD 400.00
CONTRIBUTOR NAME JASON BUSCHHOFF		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 100 MANHATTAN AVE APT 605
OCCUPATION RETIRED		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07095
EMPLOYER NAME			
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 400.00	DATE(S) RECEIVED THIS PERIOD 3/10/2018 AMOUNT(S) RECEIVED THIS PERIOD 400.00
1. SUBTOTAL (Add all receipts listed on this page)			3,800.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)		SCHEDULE A	Page No. 23 of 54
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.			
RECEIPT TYPE (USE A SEPARATE "SCHEDULE A" FOR EACH TYPE AND EACH SEPARATE ACCOUNT.)			
<input checked="checked" type="checkbox"/> 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: UNION CITY FIRST, INC.			
ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181			
CONTRIBUTOR NAME RENE JINORIO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 287 JULIANNE TER
OCCUPATION OWNER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) SECAUCUS, NJ 07094
EMPLOYER NAME JINCO			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 287 JULIANNE TR			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) SECAUCUS, NJ 07094			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	3/16/2018 1,250.00
CONTRIBUTOR NAME JOANNA CASTIALLO		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1112 WASHINGTON AVE
OCCUPATION SCHOOL ADMINISTRATOR		STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030
EMPLOYER NAME UCBOE			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00	3/22/2018 1,250.00
CONTRIBUTOR NAME JOAQUIN RODRIGUEZ		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4414 BERGENLINE AVE
OCCUPATION OPTICIAN		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07126
EMPLOYER NAME OPTICAL VISION			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 4414 BERGENLINE AVE			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07126			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00	3/13/2018 500.00
CONTRIBUTOR NAME JOCELYN RIVAS		STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 70 VREELAND AVENUE
OCCUPATION TEACHER		STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE			DATE(S) RECEIVED THIS PERIOD
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			AMOUNT(S) RECEIVED THIS PERIOD
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00	2/23/2018 600.00
1. SUBTOTAL (Add all receipts listed on this page)			3,600.00
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.)			

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

24 of 54

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

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

X

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME

JODY BURR

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

416 W SADDLE RIVER RD

OCCUPATION

REAL ESTATE

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UPPER SADDLE RIVER, NJ 07458

EMPLOYER NAME

DB REALTY

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

3900 BERGEN AVE

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

2/28/2018

500.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

500.00

CONTRIBUTOR NAME

JOHN BENNETT

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

15 ROWLAND AVE

OCCUPATION

ASSISTANT SUPERINTENDENT

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

CLIFTON, NJ 07014

EMPLOYER NAME

UCBOE

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

3912 BERGEN TURNPIKE

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

3/12/2018

2,500.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

2,500.00

CONTRIBUTOR NAME

JOHN JAY HEBERT

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

514 23RD STREET

OCCUPATION

THEATER DIRECTOR

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

EMPLOYER NAME

LOOKOUTKITTY 34 LLC

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

514 23RD STREET

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07106

2/12/2018

600.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

600.00

CONTRIBUTOR NAME

JOHN LYNCH ESQ

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

380 MOUNTAIN RD

OCCUPATION

LAWYER

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07107

EMPLOYER NAME

JOHN LYNCH ESQ

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

1814 KENNEDY BLVD

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07107

3/14/2018

750.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

750.00

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

4,350.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

25 of 54

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

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

☒MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME JOHN MEDINA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 317 6TH ST	DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,200.00
OCCUPATION SECURITY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,200.00			

CONTRIBUTOR NAME JOHN JAY HEBERT	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 514 23RD STREET	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,400.00
OCCUPATION THEATER DIRECTOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07106		
EMPLOYER NAME LOOKOUTKITTY 34 LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 514 23RD STREET (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07106				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,400.00			

CONTRIBUTOR NAME JON WELLER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 316 EISENHOWER	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TULI REALTY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LIVINGSTON, NJ 07039		
EMPLOYER NAME PROPERTY MANAGER				
EMPLOYER ADDRESS (NUMBER AND STREET) PO BOX 333 (CITY, STATE AND ZIP CODE) LIVINGSTON, NJ 07039				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME JORGE RIVERA FUNERAL HOME INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4543 KENNEDY BLVD	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			
1. SUBTOTAL (Add all receipts listed on this page)				4,450.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

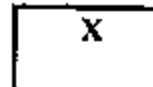
SCHEDULE A

Page No.

26 of 54

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

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

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME JORGE RODRIGUEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 20 CARMINA AVE (CITY, STATE AND ZIP CODE) RUTHERFORD, NJ 07070
OCCUPATION COMPTROLLER	STATE USE ONLY	
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/20/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME JOSE PEDRAZA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 300 45TH ST APT 5D (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07089
OCCUPATION DEAN OF STUDENTS	STATE USE ONLY	
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 2/28/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME JOSE SALAMANCA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3514 PALISADE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086
OCCUPATION RETIRED	STATE USE ONLY	
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 360.00	DATE(S) RECEIVED THIS PERIOD 3/14/2018 AMOUNT(S) RECEIVED THIS PERIOD 360.00

CONTRIBUTOR NAME JOSEPH BONACCI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1014 KENNEDY BLVD APT #2 (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
OCCUPATION DEAN OF STUDENTS	STATE USE ONLY	
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/19/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
1. SUBTOTAL (Add all receipts listed on this page)		4,110.00
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.)		

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

27 of 54

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

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

X

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME

JOSEPH FERRANTE

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

20 PRIOR WAY

OCCUPATION

ADMINISTRATOR

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

WAYNE, NJ 07470

EMPLOYER NAME

UCBOE

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

25 KENNEDY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07091

3/15/2018

1,250.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

1,250.00

CONTRIBUTOR NAME

JOSEPH GAUDIO

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

PO BOX 1144

OCCUPATION

SELF EMPLOYED

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

EMPLOYER NAME

NICKLE MANAGEMENT

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

PO BOX 1144

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

2/15/2018

1,250.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

1,250.00

CONTRIBUTOR NAME

JP MARBLE AND GRANITE CORP

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

706 6TH ST

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

UNION CITY, NJ 07087

EMPLOYER NAME

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

(CITY, STATE AND ZIP CODE)

3/8/2018

500.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

500.00

CONTRIBUTOR NAME

JP PLUMBING HEATING

STATE USE ONLY

CONTRIBUTOR ADDRESS (NUMBER AND STREET)

PO BOX 1781

OCCUPATION

STATE USE ONLY

(CITY, STATE AND ZIP CODE)

HOBOKEN, NJ 07030

EMPLOYER NAME

DATE(S) RECEIVED
THIS PERIODAMOUNT(S) RECEIVED
THIS PERIOD

EMPLOYER ADDRESS (NUMBER AND STREET)

(CITY, STATE AND ZIP CODE)

3/21/2018

500.00

RECEIPT DESCRIPTION (IF IN-KIND)

AGGREGATE YEAR-TO-DATE

500.00

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

3,500.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 28 of 54

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

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

☒ MONETARY CONTRIBUTIONS
 ☐ IN-KIND CONTRIBUTIONS-EXPENDITURES MADE BY OTHERS
 ☐ REIMBURSEMENTS/REFUNDS OF DISBURSEMENTS
 ☐ DIVIDENDS/INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME JUAN LOACES	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 600 ELIZABETH ST (CITY, STATE AND ZIP CODE) NEW MILFORD, NJ	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION POLICE LIEUTENANT	STATE USE ONLY			
EMPLOYER NAME UNION CITY POLICE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME JUANA HIDALGO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 2709 SUMMIT AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	DATE(S) RECEIVED THIS PERIOD 3/18/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION RESTAURANT OWNER	STATE USE ONLY			
EMPLOYER NAME JUANA RESTAURANT LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 2709 SUMMIT AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07092				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00		

CONTRIBUTOR NAME GLORIA CRUZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1801 BERGENLINE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
OCCUPATION RESTAURANT OWNER	STATE USE ONLY			
EMPLOYER NAME JUANA Y GLORIA RESTAURANT LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 1801 BERGENLINE AVE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00		

CONTRIBUTOR NAME JUDITH BARRIOS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 309 37TH ST (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SUPERVISOR	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		
1. SUBTOTAL (Add all receipts listed on this page)				4,000.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

29 of 54

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

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

☒MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME JULIO ANGEL RIVERA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 34 STILET AVE	DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WARREN, NJ 07059		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME JULIO VERGARA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 54 JEFFERSON	DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 3,000.00
OCCUPATION EDUCATOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 3,000.00	

CONTRIBUTOR NAME JUSTINA BUSCHHOFF	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 100 MANHATTAN AVE APT 605	DATE(S) RECEIVED THIS PERIOD 3/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 450.00
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07094		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 450.00	

CONTRIBUTOR NAME KBDS ENTERPRISES INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3196A KENNEDY BLVD	DATE(S) RECEIVED THIS PERIOD 2/4/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

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

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.)

FORM R-3

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

30 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME KEITH FURLONG	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 5 SILOMAC	DATE(S) RECEIVED THIS PERIOD 3/13/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
OCCUPATION PUBLIC RELATIONS	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH HALEDON, NJ 07508		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) 5 SILOMAC				
(CITY, STATE AND ZIP CODE) NORTH HALEDON, NJ 07508				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,000.00		

CONTRIBUTOR NAME KENNEDY NG	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3608 BERGEN DINE	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION UNION CITY EMPLOYEE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07100		
EMPLOYER NAME CITY OF UNION CITY				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME KRIVIT & KRIVIT	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1000 POTOMAC STREET, NW SUITE 250	DATE(S) RECEIVED THIS PERIOD 2/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WASHINGTON, DC 20007		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME LA DOMINICA CORP	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 635 56TH ST	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEST NEW YORK, NJ 07093		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 900.00		
1. SUBTOTAL (Add all receipts listed on this page)				4,400.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 31 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME LARRY REGAL	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 2 RIVERVIEW CT	DATE(S) RECEIVED THIS PERIOD 3/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION DEVELOPER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) IRVINGTON, NY 10533		
EMPLOYER NAME REGAL DEVELOPER CORP				
EMPLOYER ADDRESS (NUMBER AND STREET) 155 SAW MILL RIVER RD (CITY, STATE AND ZIP CODE) ARDSLEY, NY 10502				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME LAUREN SOSA-HERRERA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1002 CENTRAL AVE APT 1	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
OCCUPATION MATH COACH	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 900.00			

CONTRIBUTOR NAME LEONARD J ALTAMURA ESQ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 400 BERGENLINE AVENUE	DATE(S) RECEIVED THIS PERIOD 2/16/2018	AMOUNT(S) RECEIVED THIS PERIOD 350.00
OCCUPATION LAWYER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME LEONARD J ALTAMURA ESQ				
EMPLOYER ADDRESS (NUMBER AND STREET) 400 BERGENLINE AVENUE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 350.00			

CONTRIBUTOR NAME LEONEL ORTEGA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 543 BRANDON PLACE	DATE(S) RECEIVED THIS PERIOD 2/7/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CLIFFSIDE PARK, NJ 07010		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			
1. SUBTOTAL (Add all receipts listed on this page)				3,000.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

32 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME LESTER HERNANDEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 118 PALISADE AVE	DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION POLICE SERGEANT	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CLIFFSIDE PARK, NJ 07010		
EMPLOYER NAME UNION CITY POLICE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00		

CONTRIBUTOR NAME LILITH FELLOWESGRANDA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1003 JEFFERSON DR	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,500.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) STEWARTSVILLE, NJ 08886		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 4115 PARK AVE APT D3				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,500.00		

CONTRIBUTOR NAME LINDA SYLVESTRI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 181 ROSS AVE	DATE(S) RECEIVED THIS PERIOD 2/27/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SR ACCOUNT EXECUTIVE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HACKENSACK, NJ 07601		
EMPLOYER NAME ATLANTIC INC				
EMPLOYER ADDRESS (NUMBER AND STREET) 400 BROADACRES DR #250				
(CITY, STATE AND ZIP CODE) BLOOMFIELD, NJ 07003				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME LISA MIDDLETOWN - CRABBE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 45 CUFTER DR	DATE(S) RECEIVED THIS PERIOD 3/16/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) EAST HANOVER, NJ 07936		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 600.00		

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

3,950.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 33 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME LOCAL UNION #164 IBEW	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 205 ORBIN ROAD STE 315
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) PARAMUS, NJ 07652
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/9/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
	AGGREGATE YEAR-TO-DATE 2,500.00	

CONTRIBUTOR NAME LORRAINE BUSCHHOFF	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 100 MANHATTAN AVE APT 605
OCCUPATION LEGISLATIVE AIDE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07096
EMPLOYER NAME SENATOR STACK		
EMPLOYER ADDRESS (NUMBER AND STREET) 609 NEW YORK AVENUE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
	AGGREGATE YEAR-TO-DATE 400.00	

CONTRIBUTOR NAME LOS AMIGOS CORP	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3500 BERGENLINE AVE
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07106
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/7/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
	AGGREGATE YEAR-TO-DATE 500.00	

CONTRIBUTOR NAME LUCY SOOVAJIAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 823 18TH ST
OCCUPATION SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07113
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
	AGGREGATE YEAR-TO-DATE 1,250.00	
1. SUBTOTAL (Add all receipts listed on this page)		4,650.00
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.)		

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

34 of 54

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

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

☒ MONETARY CONTRIBUTIONS
 ☐ IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS
 ☐ REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS
 ☐ DIVIDENDS/ INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MALANGA CONSTRUCTION CO INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 285 PASSAIC AVE
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) FAIRFIELD, NJ 07004
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00	DATE(S) RECEIVED THIS PERIOD 3/9/2018 AMOUNT(S) RECEIVED THIS PERIOD 600.00

CONTRIBUTOR NAME MANUEL SUAREZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1608 KENNEDY BLVD
OCCUPATION RESTAURANT OWNER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME LAS BRISAS CAGE		
EMPLOYER ADDRESS (NUMBER AND STREET) 4900 HUDSON AVE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/22/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME MARIA DOUROS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 380 MOUNTAIN BLVD
OCCUPATION SPEECH PATHOLOGIST	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07108
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/2/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME MARIA VALDIVIA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 678 SLOCUM AVE
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RIDGEFIELD, NJ 07657
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00	DATE(S) RECEIVED THIS PERIOD 3/22/2018 AMOUNT(S) RECEIVED THIS PERIOD 600.00

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

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.)

3,700.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 35 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MARIANNE TIRABASSI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 623 PROSPECT AVE	DATE(S) RECEIVED THIS PERIOD 2/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RIDGEFIELD, NJ 07657		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME MARINI AND MANCI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 602 15TH STREET	DATE(S) RECEIVED THIS PERIOD 2/14/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION DENTIST	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME MARINI AND MANCI				
EMPLOYER ADDRESS (NUMBER AND STREET) 602 15TH STREET				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 500.00	

CONTRIBUTOR NAME MARK FLORES	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 150 NORTH CARLTON PLACE	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION S.L.E.O. III	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091		
EMPLOYER NAME CITY OF UNION CITY				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 500.00	

CONTRIBUTOR NAME MARTHA O'CONNELL	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 42 E 22ND ST	DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION EDUCATOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) BAYONNE, NJ 07002		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	
1. SUBTOTAL (Add all receipts listed on this page)				3,500.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

36 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MICHAEL CELEBRANO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 8 ACORN RD	DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00		

CONTRIBUTOR NAME MICHAEL CIRONE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1112 WASHINGTON ST	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION EDUCATOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HOBOKEN, NJ 07030		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3916 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME MICHAEL GOLBERG	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 42 CHELSEA DR	DATE(S) RECEIVED THIS PERIOD 2/26/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION DEVELOPER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LIVINGSTON, NJ 07039		
EMPLOYER NAME MICHAEL GOLBERG				
EMPLOYER ADDRESS (NUMBER AND STREET) 42 CHELSEA DR				
(CITY, STATE AND ZIP CODE) LIVINGSTON, NJ 07039				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00		

CONTRIBUTOR NAME MICHAEL MABEL	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 32 BOULVEARD	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HASBROUCK HEIGHTS, NJ 07604		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00		

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

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.)

2,750.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

37 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MICHAEL PERAGINE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 522 26TH ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07099		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME MICHAEL RUIZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 201 BERGEN AVE	DATE(S) RECEIVED THIS PERIOD 3/7/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
OCCUPATION DEAN OF STUDENTS	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 900.00		

CONTRIBUTOR NAME MICHELLE COWAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 96 OTTAWA AVE	DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION ASSISTANT PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HUSBROUCK HEIGHTS, NJ 07604		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 96 OTTAWA AVE				
(CITY, STATE AND ZIP CODE) HUSBROUCK HEIGHTS, NJ 07604				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME MICHELLE SPENCER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 34 VREELAND AVE	DATE(S) RECEIVED THIS PERIOD 3/24/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RUTHERFORD, NJ 07070		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)		AGGREGATE YEAR-TO-DATE 500.00		
1. SUBTOTAL (Add all receipts listed on this page)				3,900.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

38 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME MIKE SON & PLUMBING INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3700 NEW YORK AVE	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME MIRTHA SERRET	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4 BUTTERNUT WAY	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SPARTA, NJ 07871		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME MUSTAFA QATTOUS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 8401 KENNEDY BLVD	DATE(S) RECEIVED THIS PERIOD 2/17/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
OCCUPATION SELF EMPLOYED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
EMPLOYER NAME CREST POINT DEVELOPMENT				
EMPLOYER ADDRESS (NUMBER AND STREET) 8901 KENNEDY BLVD				
(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,500.00			

CONTRIBUTOR NAME NADIA MAKAR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 770 ANDERSON AVE #11Q	DATE(S) RECEIVED THIS PERIOD 2/27/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CLIFFSIDE PARK, NJ 07010		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

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

4,100.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

39 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME NAFPAKTOS DINER INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 543 32ND ST	DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME NANCY JAFARGIAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 729 28TH STREET	DATE(S) RECEIVED THIS PERIOD 2/11/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION OFFICER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME WASHINGTON SCJPP;				
EMPLOYER ADDRESS (NUMBER AND STREET) 3905 NEW YORK AVE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00			

CONTRIBUTOR NAME NEW HILLTOP CORP	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3100 KENNEDY BLVD	DATE(S) RECEIVED THIS PERIOD 3/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07089		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME NJEA POLITICAL ACTION COMMITTEE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) PO BOX 1211, 180 W STATE ST	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) TRENTON, NJ 08607		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,500.00			

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

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.)

4,850.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

40 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. ACH 41543181

CONTRIBUTOR NAME NORTH JERSEY EXTERMINATING INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 729 - 32ND STREET
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 2/2/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
	AGGREGATE YEAR-TO-DATE 2,500.00	

CONTRIBUTOR NAME OMAR CHAOUR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 708 27TH ST APT 4
OCCUPATION CLERK	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07089
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3916 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
	AGGREGATE YEAR-TO-DATE 500.00	

CONTRIBUTOR NAME OMAR CHAOUR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 708 27TH ST APT 4
OCCUPATION CLERK	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07089
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3916 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07091		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/7/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
	AGGREGATE YEAR-TO-DATE 900.00	

CONTRIBUTOR NAME OPTIMIZED ENGINEERING ASSOCIATION CORP	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 400 38TH ST SUITE 307
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
	AGGREGATE YEAR-TO-DATE 600.00	
1. SUBTOTAL (Add all receipts listed on this page)		4,500.00
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.)		

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

41 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME ORLANDO ABREU	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4514 HUDSON AVENUE	DATE(S) RECEIVED THIS PERIOD 2/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00	
OCCUPATION SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087			
EMPLOYER NAME UNION CITY BOARD OF EDUCATION					
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE					
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087					
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00				

CONTRIBUTOR NAME OTOOLE SCRIVO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 14 VILLAGE PARK	DATE(S) RECEIVED THIS PERIOD 2/23/2018	AMOUNT(S) RECEIVED THIS PERIOD 5,000.00	
OCCUPATION ATTORNEY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CEDAR GROVE, NJ 07009			
EMPLOYER NAME OTOOLE SCRIVO					
EMPLOYER ADDRESS (NUMBER AND STREET) OTOOLE SCRIVO					
(CITY, STATE AND ZIP CODE) 14 VILLAGE PARK					
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 5,000.00				

CONTRIBUTOR NAME PALISADE CHILDREN CENTER INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 321 37TH ST	DATE(S) RECEIVED THIS PERIOD 3/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07097			
EMPLOYER NAME					
EMPLOYER ADDRESS (NUMBER AND STREET)					
(CITY, STATE AND ZIP CODE)					
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00				

CONTRIBUTOR NAME PARTY RENTAL INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 25 ANDREWS DR	DATE(S) RECEIVED THIS PERIOD 2/12/2018	AMOUNT(S) RECEIVED THIS PERIOD 350.00	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WOODLAND PARK, NJ 07424			
EMPLOYER NAME					
EMPLOYER ADDRESS (NUMBER AND STREET)					
(CITY, STATE AND ZIP CODE)					
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 350.00				

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

7,100.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

42 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME PAULA NUNEZ MARTINEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 317 15TH ST	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION SCHOOL BUS DRIVER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME PETER DI SALVO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 5 CURTIS DRIVE	DATE(S) RECEIVED THIS PERIOD 3/13/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SALES CONSULTANT	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LINCOLN PARK, NJ 07035		
EMPLOYER NAME IMPERIAL DADE				
EMPLOYER ADDRESS (NUMBER AND STREET) 255 ROUTE 149 (CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME PREMIO FOODS INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 21-00 ROUTE 208 SOUTH, SUITE 200	DATE(S) RECEIVED THIS PERIOD 2/23/2018	AMOUNT(S) RECEIVED THIS PERIOD 5,000.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) FAIR LAWN, NJ 07410		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 5,000.00			

CONTRIBUTOR NAME PRIME UNIFORM INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 420 51ST STREET	DATE(S) RECEIVED THIS PERIOD 3/9/2018	AMOUNT(S) RECEIVED THIS PERIOD 750.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEST NEW YORK, NJ 07093		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 750.00			
1. SUBTOTAL (Add all receipts listed on this page)				7,500.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 43 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME R & J SUPERMARKET CORP	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4416 BERGENLINE AVENUE
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 2/19/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
	AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME RAFAEL ALFONSO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
	AGGREGATE YEAR-TO-DATE 600.00	

CONTRIBUTOR NAME RAUL HANAK	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 121 DODD ST
OCCUPATION SECURITY SUPERVISOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) WEEHAWKEN, NJ 07086
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/5/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
	AGGREGATE YEAR-TO-DATE 2,500.00	

CONTRIBUTOR NAME RAYMOND CETINICH	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4100 NY AVENUE
OCCUPATION POLICE OFFICER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME CITY OF UNION CITY		
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	DATE(S) RECEIVED THIS PERIOD 3/17/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
	AGGREGATE YEAR-TO-DATE 600.00	

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

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.)

4,950.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

44 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME RAYMOND COCCIOLI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1625 PATERSON PLANK RD #5
OCCUPATION ASSISTANT PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SECAUCUS, NJ 07094
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/22/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME RAYMOND ESHAGHOFF	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 6305 KENNEDY BLVD
OCCUPATION REAL ESTATE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047
EMPLOYER NAME ELITE REALTY		
EMPLOYER ADDRESS (NUMBER AND STREET) 6305 KENNEDY BLVD		
(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/20/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME READY ROOTER INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 307 3RD ST
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07104
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00	DATE(S) RECEIVED THIS PERIOD 3/14/2018 AMOUNT(S) RECEIVED THIS PERIOD 500.00

CONTRIBUTOR NAME READY ROOTER INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 307 3RD ST
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 400.00	DATE(S) RECEIVED THIS PERIOD 3/16/2018 AMOUNT(S) RECEIVED THIS PERIOD 400.00

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

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.)

3,400.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

45 of 54

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

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

☒ MONETARY CONTRIBUTIONS

☐ IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS

☐ REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS

☐ DIVIDENDS/ INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME REINO MAGIC INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 701 BERGENLINE	DATE(S) RECEIVED THIS PERIOD 2/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)			DATE(S) RECEIVED THIS PERIOD 2/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)				
AGGREGATE YEAR-TO-DATE 500.00				

CONTRIBUTOR NAME RICARDO MEDINA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 619 18TH ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
OCCUPATION SECURITY	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)				
AGGREGATE YEAR-TO-DATE 400.00				

CONTRIBUTOR NAME RICHARD CASSENS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 823 SIP ST	DATE(S) RECEIVED THIS PERIOD 3/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION SECURITY GUARD	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE			DATE(S) RECEIVED THIS PERIOD 3/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)				
AGGREGATE YEAR-TO-DATE 600.00				

CONTRIBUTOR NAME RICHARD DONOHUE	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 744 3RD AVE	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION BOWLING LANE OWNER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LYNDHURST, NJ 07071		
EMPLOYER NAME BOWL RITE LANES				
EMPLOYER ADDRESS (NUMBER AND STREET) 714 SUMMIT AVE			DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)				
AGGREGATE YEAR-TO-DATE 500.00				

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

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.)

2,000.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

46 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME RICHARD HANNA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 97 HONEYSUCKLE DR (CITY, STATE AND ZIP CODE) TOWNSHIP OF WASHINGTON, NJ 07676	DATE(S) RECEIVED THIS PERIOD 3/6/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,000.00
OCCUPATION DEAN OF STUDENTS	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,000.00			

CONTRIBUTOR NAME RITA TORRES	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 167 WEIGANDS LN (CITY, STATE AND ZIP CODE) SEACAUCUS, NJ 07094	DATE(S) RECEIVED THIS PERIOD 3/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 900.00
OCCUPATION TEACHER	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 900.00			

CONTRIBUTOR NAME ROBERT R PINZON	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 29 LEIGHTON AVE (CITY, STATE AND ZIP CODE) YONKERS, NY 10805	DATE(S) RECEIVED THIS PERIOD 3/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TEACHER	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME ROBERTO MUNIZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 536 JACKSON AVE (CITY, STATE AND ZIP CODE) TOWN OF WASHINGTON, NJ 07676	DATE(S) RECEIVED THIS PERIOD 2/29/18	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION HOME CARE	STATE USE ONLY			
EMPLOYER NAME PARKER				
EMPLOYER ADDRESS (NUMBER AND STREET) 1421 RIVER RD (CITY, STATE AND ZIP CODE) PISCATAWAY, NJ 08854				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

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

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.)

FORM R-3

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 47 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME ROLANDO CABANA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 510 MANNING CT	DATE(S) RECEIVED THIS PERIOD 3/18/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) RIVEREDGE, NJ 07061		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME RYAN LEWIS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 10 SOHINDLER ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION PRINCIPAL	STATE USE ONLY	(CITY, STATE AND ZIP CODE) EAST RUTHERFORD, NJ		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME SACHS MALAS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 439 COMMERCIAL AVE	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,500.00
OCCUPATION DEVELOPER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) PALISADES PARK, NJ 07650		
EMPLOYER NAME ROMAN UNION CITY LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 439 COMMERCIAL AVE				
(CITY, STATE AND ZIP CODE) PALISADES PARK, NJ 07650				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,500.00			

CONTRIBUTOR NAME SERGIO DATO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 1700 SUMMIT AVE	DATE(S) RECEIVED THIS PERIOD 2/28/2017	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION SECURITY KARATE OWNER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME SECURITY KARATE				
EMPLOYER ADDRESS (NUMBER AND STREET) 1700 SUMMIT AVE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

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

5,500.00

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.)

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 48 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME SERGIO DE ROJAS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 88 BEECH AVENUE	DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
OCCUPATION POLICE OFFICER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) BERKELEY HEIGHTS, NJ 07922		
EMPLOYER NAME CITY OF UNION CITY				
EMPLOYER ADDRESS (NUMBER AND STREET) 3715 PALISADE AVE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,000.00	

CONTRIBUTOR NAME SHADI ABDELJABBAR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3517 NEW YORK AVE	DATE(S) RECEIVED THIS PERIOD 2/20/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
EMPLOYER NAME UCBOE VETERANS				
EMPLOYER ADDRESS (NUMBER AND STREET) 1401 CENTRAL AVE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME SHARON SHULMAN	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 86 W 38TH ST	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION CONSULTANT	STATE USE ONLY	(CITY, STATE AND ZIP CODE) BAYONNE, NJ 07002		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME SOL RIVERA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3118 MEADOWVIEW AVE	DATE(S) RECEIVED THIS PERIOD 2/9/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION COURT INTERPRETER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
EMPLOYER NAME SOL INTERPRETING SERVICES				
EMPLOYER ADDRESS (NUMBER AND STREET) 3118 MEADOWVIEW AVE				
(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	
1. SUBTOTAL (Add all receipts listed on this page)				4,750.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 49 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME STANS SPORTS CENTER INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 528 WASHINGTON ST (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07110
OCCUPATION	STATE USE ONLY	
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/13/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME STEVEN DEMATTHEIS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 110 FAIRVIEW AVE (CITY, STATE AND ZIP CODE) VERONA, NJ 07044
OCCUPATION REAL ESTATE	STATE USE ONLY	
EMPLOYER NAME DEMATEIS REAL ESTATE		
EMPLOYER ADDRESS (NUMBER AND STREET) 110 FAIRVIEW AVE (CITY, STATE AND ZIP CODE) VERONA, NJ 07044		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,500.00	DATE(S) RECEIVED THIS PERIOD 2/5/2018 AMOUNT(S) RECEIVED THIS PERIOD 2,500.00

CONTRIBUTOR NAME STEVEN HIGUEROA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 14 BRAEMAR DRIVE (CITY, STATE AND ZIP CODE) WAYNE, NJ 07470
OCCUPATION TEACHER	STATE USE ONLY	
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 2/28/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME SUSAN POWERS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 148 37TH STREET (CITY, STATE AND ZIP CODE) UNION CITY PUBLIC SCHOOLS
OCCUPATION ASSISTANT SUPERVISOR	STATE USE ONLY	
EMPLOYER NAME UNION CITY PUBLIC SCHOOLS		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 600.00	DATE(S) RECEIVED THIS PERIOD 2/18/2018 AMOUNT(S) RECEIVED THIS PERIOD 600.00

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

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.)

5,600.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

50 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME SW LOCK AND DOORCHECK CO	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3701 KENNEDY BLVD
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07105
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00	DATE(S) RECEIVED THIS PERIOD 3/15/2018 AMOUNT(S) RECEIVED THIS PERIOD 500.00

CONTRIBUTOR NAME TANJA JACKSON	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 440 7TH ST
OCCUPATION TEACHER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) FAIRVIEW, NJ 07022
EMPLOYER NAME UCBOE		
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE		
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,800.00	DATE(S) RECEIVED THIS PERIOD 2/3/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,800.00

CONTRIBUTOR NAME TATA'S KIDS LEARNING CENTER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 301-43RD ST
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00	DATE(S) RECEIVED THIS PERIOD 3/19/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,250.00

CONTRIBUTOR NAME THOMAS BEAITNI	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 22 WIERIMUS RD
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) HILLSDALE, NJ 07642
EMPLOYER NAME		
EMPLOYER ADDRESS (NUMBER AND STREET)		
(CITY, STATE AND ZIP CODE)		
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,500.00	DATE(S) RECEIVED THIS PERIOD 3/3/2018 AMOUNT(S) RECEIVED THIS PERIOD 1,500.00

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

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.)

FORM R-3

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 51 of 54

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

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

☒ MONETARY CONTRIBUTIONS

☐ IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS

☐ REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS

☐ DIVIDENDS/ INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME THOMAS CHARTIER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 8 CONGRESS ST	
OCCUPATION HOME BUILDER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307	
EMPLOYER NAME SELF EMPLOYED		DATE(S) RECEIVED THIS PERIOD 3/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET) 8 CONGRESS ST			
(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307			
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME TIME AUTO PARTS INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 817 30TH ST	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00		

CONTRIBUTOR NAME TOTAL BEAUTY IMAGE INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 3900 BERGENLINE AVENUE	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/1/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00		

CONTRIBUTOR NAME TRENDY MANAGEMENT	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) PO BOX 1089	
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) CLIFTON, NJ 07014	
EMPLOYER NAME		DATE(S) RECEIVED THIS PERIOD 3/2/2018	AMOUNT(S) RECEIVED THIS PERIOD 2,400.00
EMPLOYER ADDRESS (NUMBER AND STREET)			
(CITY, STATE AND ZIP CODE)			
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 2,400.00		

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

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.)

FORM R-3

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No.

52 of 54

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

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

MONETARY
CONTRIBUTIONSIN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERSREIMBURSEMENTS/
REFUNDS OF DISBURSEMENTSDIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME LUIS BELTRAN SR	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 4545 PALISADE AVE APT 9A (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087	DATE(S) RECEIVED THIS PERIOD 3/14/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,000.00
OCCUPATION SECURITY	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,000.00			

CONTRIBUTOR NAME FRED FISH	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 10 E. PALISADE AVE (CITY, STATE AND ZIP CODE) ENGLEWOOD, NJ 07631	DATE(S) RECEIVED THIS PERIOD 2/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION ATTORNEY	STATE USE ONLY			
EMPLOYER NAME UNION KENNEDY ASSOCIATES				
EMPLOYER ADDRESS (NUMBER AND STREET) 10 E PALISADE AVE (CITY, STATE AND ZIP CODE) ENGLEWOOD, NJ 07631				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

CONTRIBUTOR NAME VADALONA PEREZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 613 4TH ST (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07086	DATE(S) RECEIVED THIS PERIOD 3/15/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION EDUCATOR	STATE USE ONLY			
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE (CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 500.00			

CONTRIBUTOR NAME VIBIL INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) PO BOX 756 (CITY, STATE AND ZIP CODE) ALPINE, NJ 07620	DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY			
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET) (CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)	AGGREGATE YEAR-TO-DATE 1,250.00			

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

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.)

4,000.00

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 53 of 54

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

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

☒ MONETARY
CONTRIBUTIONS☐ IN-KIND CONTRIBUTIONS-
EXPENDITURES MADE BY OTHERS☐ REIMBURSEMENTS/
REFUNDS OF DISBURSEMENTS☐ DIVIDENDS/
INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME VICTORIA DICKINSON	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 100 PAULIN	DATE(S) RECEIVED THIS PERIOD 3/22/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION EDUCATOR	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LEONIA, NJ		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME VINCENTE RUIZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 20 78TH ST	DATE(S) RECEIVED THIS PERIOD 2/16/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION PHYSICIAN FOR UCBOE	STATE USE ONLY	(CITY, STATE AND ZIP CODE) NORTH BERGEN, NJ 07047		
EMPLOYER NAME UCBOE				
EMPLOYER ADDRESS (NUMBER AND STREET) 3912 BERGEN TURNPIKE				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07087				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME VISION MEDIA MARKETING	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 854 8TH STREET	DATE(S) RECEIVED THIS PERIOD 2/23/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION VICE PRESIDENT	STATE USE ONLY	(CITY, STATE AND ZIP CODE) SECAUCUS, NJ 07094		
EMPLOYER NAME VISION MEDIA				
EMPLOYER ADDRESS (NUMBER AND STREET) 854 8TH STREET				
(CITY, STATE AND ZIP CODE) SECAUCUS, NJ 07094				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME WILLIAM GUARINI INC	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 132 MALLORY AVE	DATE(S) RECEIVED THIS PERIOD 3/1/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION	STATE USE ONLY	(CITY, STATE AND ZIP CODE) JERSEY CITY, NJ 07307		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	
1. SUBTOTAL (Add all receipts listed on this page)				5,000.00
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.)				

ITEMIZED RECEIPTS (OTHER THAN LOANS)

SCHEDULE A

Page No. 54 of 54

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

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

☒ MONETARY CONTRIBUTIONS

☐ IN-KIND CONTRIBUTIONS- EXPENDITURES MADE BY OTHERS

☐ REIMBURSEMENTS/ REFUNDS OF DISBURSEMENTS

☐ DIVIDENDS/ INTEREST

COMMITTEE NAME: UNION CITY FIRST, INC.

ACCOUNT NAME AND NUMBER: UNION CITY FIRST, INC. AC# 41543181

CONTRIBUTOR NAME WILLIAM PEER	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 340 LINCOLN AVE	DATE(S) RECEIVED THIS PERIOD 3/10/2018	AMOUNT(S) RECEIVED THIS PERIOD 1,250.00
OCCUPATION RETIRED	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LYNDHUST, NJ 07071		
EMPLOYER NAME				
EMPLOYER ADDRESS (NUMBER AND STREET)				
(CITY, STATE AND ZIP CODE)				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 1,250.00	

CONTRIBUTOR NAME PETER C. SANTOS	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 46 REMBRANDT WAY	DATE(S) RECEIVED THIS PERIOD 2/28/2018	AMOUNT(S) RECEIVED THIS PERIOD 500.00
OCCUPATION MECHANIC	STATE USE ONLY	(CITY, STATE AND ZIP CODE) EAST WINDSOR, NJ 08520		
EMPLOYER NAME WINDSOR MECHANIC LLC				
EMPLOYER ADDRESS (NUMBER AND STREET) 46 REMBRANDT WAY				
(CITY, STATE AND ZIP CODE) EAST WINDSOR, NJ 08520				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 500.00	

CONTRIBUTOR NAME YESENIA CABRERA	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 509 21ST APT #1	DATE(S) RECEIVED THIS PERIOD 3/21/2018	AMOUNT(S) RECEIVED THIS PERIOD 400.00
OCCUPATION PLUMBER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07088		
EMPLOYER NAME JL PLUMBING AND HEATING				
EMPLOYER ADDRESS (NUMBER AND STREET) 509 21ST APT #1				
(CITY, STATE AND ZIP CODE) UNION CITY, NJ 07088				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 400.00	

CONTRIBUTOR NAME YOLANDA MARQUEZ	STATE USE ONLY	CONTRIBUTOR ADDRESS (NUMBER AND STREET) 71 MONROE ST	DATE(S) RECEIVED THIS PERIOD 2/8/2018	AMOUNT(S) RECEIVED THIS PERIOD 600.00
OCCUPATION HOTEL OWNER	STATE USE ONLY	(CITY, STATE AND ZIP CODE) LITTLE FERRY, NJ 07643		
EMPLOYER NAME SHEFAH CORP				
EMPLOYER ADDRESS (NUMBER AND STREET) 71 MONROE ST				
(CITY, STATE AND ZIP CODE) LITTLE FERRY, NJ 07643				
RECEIPT DESCRIPTION (IF IN-KIND)			AGGREGATE YEAR-TO-DATE 600.00	

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

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.)

2,750.00

257,360.00

LOANS RECEIVED	SCHEDULE B	Page No. 1	of 1
-----------------------	-------------------	-------------------	-------------

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

COMMITTEE NAME: **UNION CITY FIRST, INC**

ACCOUNT NAME and NUMBER: **UNION CITY FIRST, INC.** **AC# 032-900123-4**

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	

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 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	

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

1. TOTAL NEW LOANS, THIS PERIOD (Complete this line on the last page used. Carry forward to page 2, Line 9, Column A.)	
2. TOTAL AMOUNT OF LOANS PLUS INTEREST, THIS PERIOD	
3. TOTAL LOAN PAYMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to page 2, Line 17, Column A.)	
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.)	

REFUND OF EXCESSIVE CONTRIBUTIONS

Page No. 1 of 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: UNION CITY FIRST, INC

ACCOUNT NAME and NUMBER: UNION CITY FIRST, INC. AC#: 032-500143-9

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

ITEMIZED OPERATING DISBURSEMENTS		SCHEDULE C		Page No. 1 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
BRIAN STACK CIVIC ASSOCIATION 811 WEST STREET UNION CITY, NJ 07087	DONATION	1,000.00	01/04/2018	1607	
US POSTAL SERVICES 301 30TH STREET UNION CITY, NJ 07087	POSTAGE FOR ELEC REPORT	23.75	01/16/2018	ATM	
PUBLIC SERVICE PO BOX 14444 NEW BRUNSWICK, NJ 08901	UTILITIES: GAS AND ELECTRIC	300.00	01/26/2018	EFT	
VALLEY NATIONAL BANK 8901 KENNEDY BLVD NORTH BERGEN, NJ 07047	MONTHLY SERVICE CHARGE	25.00	01/31/2018	EFT	
VERIZON PO BOX 408 NEWARK, NJ 07101	UTILITIES: TELEPHONE	377.34	02/08/2018	EFT	
VERIZON PO BOX 408 NEWARK, NJ 07101	HEADQUARTERS INTERNET	269.98	02/08/2018	EFT	
MEGAPATH 6600 KNOLL CENTER PLEASANTON, CA 94566	HEADQUARTERS PHONE SERVICE	938.12	02/08/2018	EFT	
NEW JERSEY DEMOCRATIC MAJ COMMITTEE P O BOX 099 TRENTON, NJ 08625	CAUCUS LUNCHES	252.00	02/08/2018	EFT	
US POSTAL SERVICES 301 30TH STREET UNION CITY, NJ 07087	POSTAGE OF FUNDRAISER INVITATIONS	2,450.00	02/08/2018	EFT	
DUNKIN DONUTS 2109 KENNEDY BLVD NORTH BERGEN, NJ 07047	COFFEE ROLLS AND SANDWICHES FOR VOLUNTEERS	596.00	02/13/2018	1609	
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	1,028.79	02/13/2018	EFT	
1. SUBTOTAL (Add all disbursements listed on this page)		7,260.98			
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. 2 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	527.22	02/15/2018	ATM	
CLEMENTE BAKERY 120 LEUNING ST SOUTH HACKENSACK, NJ 07606	CATERING FOR THREE POLITICAL EVENTS	25,000.00	02/16/2018	1608	
BON VENTURE 34 IRONA RD FLANDERS, NJ 07836	AD JOURNAL	1,102.40	02/16/2018	EFT	
PUBLIC SERVICE PO BOX 14444 NEW BRUNSWICK, NJ 08901	UTILITIES: GAS AND ELECTRIC	648.95	02/16/2018	EFT	
DUNKIN DONUTS 2109 KENNEDY BLVD RIVERDA	COFFEE AND DONUTS FOR VOLUNTEERS	59.54	02/20/2018	ATM	
DE PALMA PIZZERIA 1814 NEW YORK AVE UNION CITY, NJ 07087	FOOD FOR VOLUNTEERS	67.45	02/22/2018	ATM	
DE PALMA PIZZERIA 1814 NEW YORK AVE UNION CITY, NJ 07087	FOOD FOR VOLUNTEERS	19.50	02/22/2018	ATM	
TERMINI PIZZA 4100 BERGENLINE AVE UNION CITY, NJ 07087	FOOD FOR HEADQUARTERS	336.50	02/22/2018	EFT	
DE PALMA PIZZERIA 1814 NEW YORK AVE UNION CITY, NJ 07087	FOOD FOR VOLUNTEERS	48.79	02/22/2018	ATM	
VERIZON PO BOX 408 NEWARK, NJ 07101	UTILITIES: TELEPHONE	375.07	02/22/2018	EFT	
US POSTAL SERVICES 150 POMPTON PLAINS CROSSROAD WAYNE, NJ 07470	POSTAGE FOR FUNDRAISING INVITATIONS	1,500.00	02/27/2018	EFT	
1. SUBTOTAL (Add all disbursements listed on this page)		29,685.42			
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. 3 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
RENT FAST, INC 418 45TH STREET UNION CITY, NJ 07087	TRUC CAMPAIGN TRUCK RENTAL	2,210.00	02/28/2018	1611	
VALLEY NATIONAL BANK 20 - 24 FAIRLAWN AVENUE FAIRLAWN, NJ 07410	MONTHLY SERVICE CHARGE	25.00	02/28/2018	ATM	
				EFT	
BRIAN STACK CIVIC ASSOCIATION 1202 SUMMIT AVE UNION CITY, NJ 07087	DONATION	55,000.00	03/02/2018	1613	
AMAZON PO BOX 81226 SEATTLE, WASHINGTON 98108	OFFICE SUPPLIES	46.26	03/03/2018	ATM	
AMAZON PO BOX 81226 SEATTLE, WASHINGTON 98108	OFFICE SUPPLIES	748.75	03/05/2018	ATM	
SEE SCHEDULE E				EFT	
VERIZON PO BOX 408 NEWARK, NJ 07101	HEADQUARTERS INTERNET	134.99	03/06/2018	EFT	
BRIAN STACK CIVIC ASSOCIATION 1202 SUMMIT AVE UNION CITY, NJ 07087	DONATION	5,000.00	03/06/2018	1614	
DE PALMA PIZZERIA 1814 NEW YORK AVE UNION CITY, NJ 07087	FOOD FOR VOLUNTEERS	42.20	03/08/2018	ATM	
SEE SCHEDULE E				1612	
1. SUBTOTAL (Add all disbursements listed on this page)		63,207.20			
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. 4 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
SEE SCHEDULE E				1615	
BRIAN STACK CIVIC ASSOCIATION 811 WEST STREET UNION CITY, NJ 07087	DONATION	50,000.00	03/13/2018	1619	
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	19.17	03/13/2018	ATM	
US POSTAL SERVICES 150 POMPTON PLAINS CROSSROAD WAYNE, NJ 07470	POSTAGE FOR FUNDRAISING INVITATIONS	500.00	03/14/2018	1616	
IHOP 3196 KENNEDY BLVD UNION CITY, NJ 07087	VOLUNTEER THANK YOU PARTY	3,000.00	03/14/2018	1618	
UHAUL CENTER OF NORTH BERGEN 6701 TONNELE AVE NORTH BERGEN, NJ 07047	TRUCK FOR SIGN DELIVERY	114.60	03/14/2018	ATM	
FACEBOOK ONE HACKER WAY MENLO PARK, CA 94025	SOCIAL MEDIA PAGE	25.00	03/20/2018	EFT	
VALLEY NATIONAL BANK 20 - 24 FAIRLAWN AVENUE FAIRLAWN, NJ 07410	BANK CHARGE	20.00	03/14/2018	EFT	
UHAUL CENTER OF NORTH BERGEN 6701 TONNELE AVE NORTH BERGEN, NJ 07047	TRUCK RENTAL GAS	11.23	03/14/2018	ATM	
EASTERN BUSES 406 32ND ST UNION CITY, NJ 07087	FUNDRAISER TRANSPORTATION	3,000.00	03/15/2018	1620	
ROYAL PRINTING SERVICES 435 51ST ST WEST NEW YORK, NJ 07093	MAILING FOR FUNDRAISER	8,000.00	03/15/2018	1622	
1. SUBTOTAL (Add all disbursements listed on this page)		64,690.00			
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. 5 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
US POSTAL SERVICES 150 POMPTON PLAINS CROSSROAD WAYNE, NJ 07470	POSTAGE FOR FUNDRAISING INVITATIONS	1,500.00	03/15/2018	1621	
DE PALMA PIZZERIA 8728 KENNEDY BLVD NORTH BERGEN, NJ 07047	FOOD FOR VOLUNTEERS	80.92	03/16/2018	ATM	
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	30.38	03/16/2018	ATM	
STAPLES 107 ROUTE 23 NORTH RIVERDALE, NJ 07458	SUPPLIES FOR HEADQUARTERS	344.60	03/16/2018	ATM	
DE PALMA PIZZERIA 8728 KENNEDY BLVD NORTH BERGEN, NJ 07047	FOOD FOR VOLUNTEERS	86.24	03/19/2018	ATM	
DE PALMA PIZZERIA 8728 KENNEDY BLVD NORTH BERGEN, NJ 07047	FOOD FOR VOLUNTEERS	281.49	03/19/2018	ATM	
SEE SCHEDULE E				1625	
SEE SCHEDULE E				1624	
PARK PAC 32ND STREET & BERGENLINE AVENUE UNION CITY, NJ 07087	TRUCK RENTAL FOR POLITICAL SIGN DELIVERY	1,000.00	03/20/2018	1617	
AMAZON PO BOX 81226 SEATTLE, WASHINGTON 98108	OFFICE SUPPLIES	330.51	03/20/2018	EFT	
STAPLES 107 ROUTE 23 NORTH RIVERDALE, NJ 07458	SUPPLIES FOR HEADQUARTERS	264.75	03/20/2018	EFT	
1. SUBTOTAL (Add all disbursements listed on this page)		3,918.89			
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. 6 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
GRAY CLIFF MOONACHIE RD MOONACHIE, NJ 07074	FOOD AND BEVERAGE FOR FUNDRAISER	83,167.00	03/22/2018	1632	
BVMC CORP 22ND STREET UNION CITY, NJ 07087	FUNDRAISER AT CLIFF - SOUND SYSTEM	12,750.00	03/22/2018	1629	
DREAM FLOWER SHOP 701 32ND ST UNION CITY, NJ 07087	FLOWERS FOR FUNDRAISER	3,500.00	03/22/2018	1631	
EASTERN BUSES 406 32ND ST UNION CITY, NJ 07087	FUNDRAISER TRANSPORTATION	1,950.00	03/22/2018	1630	
HAVANA ON THE HUDSON 1907 WILLOW AVE WEBHAWKEN, NJ 07086	CIGARS FOR FUNDRAISER	1,348.00	03/22/2018	1633	
IHOP 3196 KENNEDY BLVD UNION CITY, NJ 07087	VOLUNTEER THANK YOU PARTY	3597.00	03/23/2018	1628	
MEGAPATH 6600 KNOLL CENTER PLEASANTON, CA 94566	HEADQUARTERS PHONE SERVICE	952.25	03/23/2018	EFT	
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	116.08	03/23/2018	EFT	
JADE LIMITED LLC PO BOX 1144 UNION CITY, NJ 07087	RENT FOR MARCH 2017 - FEB 2018	6,000.00	03/26/2018	EFT	
MAXIMO ARANA 726 29TH ST UNION CITY, NJ 07087	FUNDRAISER TRANSPORTATION	2,000.00	03/26/2018	1627	
VERIZON PO BOX 408 NEWARK, NJ 07101	UTILITIES: TELEPHONE	336.24	03/21/2018	EFT	
1. SUBTOTAL (Add all disbursements listed on this page)		115,716.57			
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. 7 of 7	
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. USE A SEPARATE "SCHEDULE C" FOR EACH SEPARATE ACCOUNT					
COMMITTEE NAME: UNION CITY FIRST, INC					
ACCOUNT NAME and NUMBER:		UNION CITY FIRST, INC.		AC#: 41543181	
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.					
VALLEY NATIONAL BANK 20 - 24 FAIRLAWN AVENUE FAIRLAWN, NJ 07410	RETURN CHECK CHARGE	20.00	03/26/2018	EFT	
VALLEY NATIONAL BANK 20 - 24 FAIRLAWN AVENUE FAIRLAWN, NJ 07410	RETURN CHECK CHARGE	20.00	03/26/2018	EFT	
ROYAL PRINTING SERVICES 435 51ST ST WEST NEW YORK, NJ 07093	CAMPAIGN LITERATURE	68,000.00	03/26/2018	EFT	
OFFICE DEPOT 59 WASHINGTON ST HOBOKEN, NJ 07030	OFFICE SUPPLIES	56.54	03/27/2018	1626	
DUNKIN DONUTS 2109 KENNEDY BLVD RIVERDA	COFFEE AND DONUTS FOR VOLUNTEERS	52.23	03/27/2018	ATM	
STAPLES 106 ROUTE 23 NORTH RIVERDALE, NJ 07457	SUPPLIES FOR HEADQUARTERS	30.91	03/27/2018	ATM	
FACEBOOK 1 HACKER WAY MENLO PARK, CA 94025	INTERNET	50.00	03/27/2018	EFT	
DE PALMA PIZZERIA 8728 KENNEDY BLVD NORTH BERGEN, NJ 07047	FOOD FOR VOLUNTEERS	33.00	03/22/2018	EFT	
VALLEY NATIONAL BANK 20 - 24 FAIRLAWN AVENUE FAIRLAWN, NJ 07410	MONTHLY SERVICE CHARGE	343.50	03/30/2018	EFT	
STAPLES 107 ROUTE 23 NORTH RIVERDALE, NJ 07458	SUPPLIES FOR HEADQUARTERS REFUND	-38.69	03/20/2018	EFT	
1. SUBTOTAL (Add all disbursements listed on this page)		68,567.49			
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 14, Column A.)		353,046.55			

ITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES AND COMMITTEES

SCHEDULE D

Page No. 1 of 1

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
X CANDIDATES / COMMITTEES

ALL OTHER
CANDIDATES / COMMITTEES

COMMITTEE NAME: UNION CITY FIRST, INC

ACCOUNT NAME and NUMBER: UNION CITY FIRST, INC A/C# 41543181

RECIPIENT NAME, ADDRESS
(Number and Street, City, State, Zip Code)

ELECTION DATE
DISTRICT OR COUNTY
OR MUNICIPALITY

CHECK
NO(S). DATE(S)

AMT
OF EACH
CONTRIBUTION

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

0.00

2. TOTAL DISBURSEMENTS, 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.

0.00

ITEMIZED EXPENDITURES MADE AND INCURRED ON BEHALF OF CANDIDATES AND COMMITTEES

SCHEDULE E

Page No. 1 of 2

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

X

ALL OTHER
CANDIDATES /COMMITTEES

COMMITTEE NAME: UNION CITY FIRST, INC

ACCOUNT NAME and NUMBER: UNION CITY FIRST, INC

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		
MAP DISTRIBUTORS INC 4312 LIBERTY AVE NORTH BERGEN, NJ 07047	CAMPAIGN PHOTOGRPAHY		1,400.00	3/6/2018	EFT

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT
BRIAN P STACK	5/8/2018	UNION CITY	280.00
LUCIO P FERNANDEZ	5/8/2018	UNION CITY	280.00
MARYURY A MARTINETTI	5/8/2018	UNION CITY	280.00
CELIN VALDIVIA	5/8/2018	UNION CITY	280.00
WENDY GRULLON	5/8/2018	UNION CITY	280.00

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		
ROYAL PRINTING 435-51ST ST WEST NEW YORK, NJ 07093	CAMPAIGN LITERATURE		8,000.00	3/9/2018	1612

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT
BRIAN P STACK	5/8/2018	UNION CITY	1,600.00
LUCIO P FERNANDEZ	5/8/2018	UNION CITY	1,600.00
MARYURY A MARTINETTI	5/8/2018	UNION CITY	1,600.00
CELIN VALDIVIA	5/8/2018	UNION CITY	1,600.00
WENDY GRULLON	5/8/2018	UNION CITY	1,600.00

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		
ROYAL PRINTING 435-51ST ST WEST NEW YORK, NJ 07093	CAMPAIGN LITERATURE		15,000.00	3/10/2018	1615

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT
BRIAN P STACK	5/8/2018	UNION CITY	3,000.00
LUCIO P FERNANDEZ	5/8/2018	UNION CITY	3,000.00
MARYURY A MARTINETTI	5/8/2018	UNION CITY	3,000.00
CELIN VALDIVIA	5/8/2018	UNION CITY	3,000.00
WENDY GRULLON	5/8/2018	UNION CITY	3,000.00

1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page) **24,400.00**

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)

3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)

4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to page 10, "Schedule F," Line 2.)

ITEMIZED EXPENDITURES MADE AND INCURRED ON BEHALF OF CANDIDATES AND COMMITTEES

SCHEDULE E

Page No. 2 of 2

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

X

ALL OTHER
CANDIDATES /COMMITTEES

COMMITTEE NAME: UNION CITY FIRST, INC

ACCOUNT NAME and NUMBER: UNION CITY FIRST, INC

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		
ROYAL PRINTING 435-51ST ST WEST NEW YORK, NJ 07093	BIRTHDAY CARDS FOR REGISTERED VOTERS		6,000.00	3/20/2018	1625

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT
BRIAN P STACK	5/8/2018	UNION CITY	1,200.00
LUCIO P FERNANDEZ	5/8/2018	UNION CITY	1,200.00
MARYURY A MARTINETTI	5/8/2018	UNION CITY	1,200.00
CELIN VALDIVIA	5/8/2018	UNION CITY	1,200.00
WENDY GRULLON	5/8/2018	UNION CITY	1,200.00

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		
ROYAL PRINTING 435-51ST ST WEST NEW YORK, NJ 07093	CAMPAIGN LITERATURE		4,000.00	3/20/2018	1624

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

CANDIDATE/COMMITTEE NAME	ELECTION DATE	DISTRICT OR COUNTY OR MUNICIPALITY	PRO-RATED AMOUNT
BRIAN P STACK	5/8/2018	UNION CITY	800.00
LUCIO P FERNANDEZ	5/8/2018	UNION CITY	800.00
MARYURY A MARTINETTI	5/8/2018	UNION CITY	800.00
CELIN VALDIVIA	5/8/2018	UNION CITY	800.00
WENDY GRULLON	5/8/2018	UNION CITY	800.00

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		

ALLOCATIONS OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(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)		10,000.00
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)		34,400.00
3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)		
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to page 10, "Schedule F," Line 2.)		

DEBTS AND OBLIGATIONS OWED BY COMMITTEE

SCHEDULE F

PAGE No. 2 of 2

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

COMMITTEE NAME:

ACCOUNT NAME and NUMBER:

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
DUNKIN DONUTS 704 KENNEDY BLVD UNION CITY, NJ 07087	75,000.00	0.00	0.00	75,000.00
DEBT PURPOSE FOOD VARIOUS EVENTS				

DEBT PURPOSE				

DEBT PURPOSE				

DEBT PURPOSE				

SUMMARY OF DEBTS AND OBLIGATIONS:

1. TOTAL OUTSTANDING LOANS PLUS INTEREST FROM SCHEDULE B, PAGE 5, LINE 4	
2. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID ON BEHALF OF CANDIDATES/COMMITTEES FROM SCHEDULE E, PAGE 9, LINE 4	
3. TOTAL OUTSTANDING OBLIGATIONS, SCHEDULE F (Complete this line on the last page used.)	158,695.00
4. TOTAL OUTSTANDING DEBTS/OBLIGATIONS OWED BY COMMITTEE (Add lines 1, 2 and 3. Carry forward to front page, Line 10.)	158,695.00

DEBTS AND OBLIGATIONS OWED BY COMMITTEE

SCHEDULE F

PAGE No. 1 of 2

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

COMMITTEE NAME:

ACCOUNT NAME and NUMBER:

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
JOE LAUREL JERSEY CITY, NJ	15,500.00	0.00	0.00	15,500.00
DEBT PURPOSE ROBO CALLS				

CENTRAL BAKERY 105 S STATE ST HACKENSACK, NJ 07601	25,000.00	0.00	0.00	25,000.00
DEBT PURPOSE FOOD FOR EVENTS				

DONOHUE, GIRONDA AND DORIA 310 BROADWAY BAYONNE, NJ 07002	36,475.00	0.00	0.00	36,475.00
DEBT PURPOSE ACCOUNTING SERVICES				

ROYAL PRINTING SERVICES P.O. BOX 1000 WEST NEW YORK, NJ 07093	115,720.00	109,000.00	0.00	6,720.00
DEBT PURPOSE PRINTING SERVICES				

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

DEBTS AND OBLIGATIONS OWED TO COMMITTEE
(Accounts Receivable)

SCHEDULE G

Page No. 1 of 1

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

USE A SEPARATE "SCHEDULE G" FOR EACH SEPARATE ACCOUNT AND EACH SEPARATE RECIPIENT TYPE

COMMITTEE NAME: **UNION CITY FIRST, INC**

ACCOUNT NAME and NUMBER: **UNION CITY FIRST, INC** ACC# 032-900123-4

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
N/A		N/A	N/A	N/A	N/A
DATE DEBT INCURRED	DEBT DESCRIPTION				

DATE DEBT INCURRED	DEBT DESCRIPTION				

DATE DEBT INCURRED	DEBT DESCRIPTION				

DATE DEBT INCURRED	DEBT DESCRIPTION				

DATE DEBT INCURRED	DEBT DESCRIPTION				

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

2.TOTAL RECEIPTS, THIS PERIOD (Complete this line on the last page used.

Carry forward to FRONT PAGE, LINE 8.)