



**POLITICAL COMMITTEE - REGISTRATION STATEMENT
AND DESIGNATION OF
CAMPAIGN TREASURER AND DEPOSITORY**

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION
P O Box 185, Trenton, NJ 08625-0185
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)
www.elec.state.nj.us/

**FORM PC
FOR STATE USE ONLY**

ELEC RECEIVED

OCT 19 2011

PLEASE TYPE OR PRINT

Committee Name **LET THE PEOPLE DECIDE**

Identifying Title or Acronym (Optional)

Address (Number and Street, City, State, Zip Code)
450 7TH STREET, HOBOKEN, NJ, 07030

*(Area) Day Telephone **201-519-0177** *(Area) Evening Telephone

County **HUDSON** Legal Name of Election District or Municipality **HOBOKEN**

Election Date **NOV 8, 2011** Political Party, if any

Election Type (check one) Primary General School Amendment
 Municipal Run-Off Special Yes No

CHAIRPERSON

Name **FRANK RAIA**

Mailing Address **450 7TH STREET**

City **Hoboken** State **NEW JERSEY** Zip Code **07030**

*(Area) Day Telephone **201-519-0177** *(Area) Evening Telephone

TREASURER

Name **ANDREW CANONICO**

Mailing Address **21 WALNUT STREET**

City **ELMWOOD PARK** State **NEW JERSEY** Zip Code **07407**

*(Area) Day Telephone **201-254-9409** *(Area) Evening Telephone

Resident Address **21 WALNUT STREET**

City **ELMWOOD PARK** State **NEW JERSEY** Zip Code **07407**

DEPOSITORY INFORMATION

Name of Bank or Depository **BCB - BAYONNE COMMUNITY BANK**

Mailing Address **401 WASHINGTON STREET**

City **Hoboken** State **NEW JERSEY** Zip Code **07030**

(Area) Day Telephone **201-659-8281**

Account Name **LET THE PEOPLE DECIDE** Account Number **0614000206**

LIST THE NAME(S), MAILING ADDRESS(ES) AND TELEPHONE NUMBER(S) OF ANY PERSON(S) AUTHORIZED TO SIGN CHECKS OR OTHERWISE MAKE TRANSACTIONS (Use additional sheets if necessary)

| | | |
|---|----------------------------|---------------------------------------|
| Name FRANK RAIA | | |
| Mailing Address 450 7th STREET | | |
| City Hoboken | State NEW JERSEY | Zip Code 07030 |
| *(Area) Day Telephone 201-519-0177 | | *(Area) Evening Telephone — |

| | | |
|-----------------------|-------|---------------------------|
| Name | | |
| Mailing Address | | |
| City | State | Zip Code |
| *(Area) Day Telephone | | *(Area) Evening Telephone |

| | | |
|-----------------------|-------|---------------------------|
| Name | | |
| Mailing Address | | |
| City | State | Zip Code |
| *(Area) Day Telephone | | *(Area) Evening Telephone |

General Organizational Category or Affiliation (This section includes, but is not limited to support of or opposition to a candidate, public officeholder, or public question or support of or affiliation with a business, union, professional or trade association, ideological group, civic association, or other entity)

This Committee was formed to participate in the Dialog relating to Public Questions in NJ: to oppose the public question in Hoboken, as worded, relating to RENT CONTROL; AND to promote the ~~PASSAGE OF OTHER QUESTIONS STATEWIDE, such as sports betting.~~

List the names/ mailing addresses of the persons or entities having control over the affairs of the political committee (This section includes, but is not limited to persons in whose name or at whose direction or suggestion the committee solicits funds or makes contributions)

| | |
|--|--|
| FRANK RAIA NAME OF PERSON OR ENTITY | 450 7th STREET MAILING ADDRESS |
| BUILDER OF AFFORDABLE HOUSING OCCUPATION | Hoboken, NJ 07030 CITY/STATE/ZIP |
| | SELF - EMPLOYED EMPLOYER NAME |
| | 450 7th STREET EMPLOYER MAILING ADDRESS |
| | Hoboken, NJ 07030 CITY/STATE/ZIP |

| | |
|--|--|
| ANDREW CANONICO NAME OF PERSON OR ENTITY | 21 WALNUT STREET MAILING ADDRESS |
| RETIRED OCCUPATION | ELMWOOD PARK, NJ, 07407 CITY/STATE/ZIP |
| | RETIRED EMPLOYER NAME |
| | — EMPLOYER MAILING ADDRESS |
| | — CITY/STATE/ZIP |

List the economic, political, or other particular interests and objectives to be advanced by the political committee

To INCREASE the participation of the
ELECTORATE in the outcome of ALL PUBLIC
BALLOT QUESTIONS, AND to FURTHER the involvement
OF ALL VOTERS in the political process.

List the name and resident address of a New Jersey resident who has been designated by the committee as the agent of the political committee to receive service of legal process Note if the treasurer is a New Jersey resident, he/she may be designated to accept service of legal process

Name

FRANK RAIA

Mailing Address

450 7th STREET

City

Hoboken

State

NJ

Zip Code

07030

CHAIRPERSON/TREASURER CERTIFICATION FOR PUBLIC QUESTION COMMITTEES

I certify that the statements on this document are true and correct I am aware that if any of the statements are willfully false, I may be subject to punishment

10/14/11
DATE

FRANK RAIA
PRINT FULL NAME (CHAIRPERSON)

Frank Raia
SIGNATURE (CHAIRPERSON)

10/14/11
DATE

ANDREW CANONICO
PRINT FULL NAME (TREASURER)

Andrew Canonico
SIGNATURE (TREASURER)

CHAIRPERSON/TREASURER CERTIFICATION FOR POLITICAL COMMITTEES

I certify that the statements on this document are true and correct I further certify that no candidate or officeholder has established, authorized the establishment of, maintained or participated directly or indirectly in the management or control of the political committee, and no candidate shall be permitted to do so during the existence of the political committee I am aware that if any of the statements on this document are willfully false I may be subject to punishment

DATE

PRINT FULL NAME (CHAIRPERSON)

SIGNATURE (CHAIRPERSON)

10/14/11
DATE

~~ANDREW CANONICO~~
PRINT FULL NAME (TREASURER)

~~*Andrew Canonico*~~
SIGNATURE (TREASURER)

LIST THE NAMES/MAILING ADDRESSES OF THE PERSON OR ENTITIES WHO, DIRECTLY OR THROUGH AN AGENT, PARTICIPATED IN THE INITIAL ORGANIZATION OF THE COMMITTEE (Use additional sheets if necessary)

| | |
|--------------------------|--------------------------|
| NAME OF PERSON OR ENTITY | MAILING ADDRESS |
| | CITY/STATE/ZIP |
| OCCUPATION | EMPLOYER NAME |
| | EMPLOYER MAILING ADDRESS |
| | CITY/STATE/ZIP |

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