



SINGLE CANDIDATE COMMITTEE - CERTIFICATE OF ORGANIZATION 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)
 Web site <http://www.elec.state.nj.us/>

FORM D-1
FOR STATE USE ONLY

ELEC RECEIVED
APR 17 2012

PLEASE TYPE OR PRINT

Candidate Name Mohammed Hameeduddin

Candidate Committee Name Committee to Re Elect Mohammed Hameeduddin

Address (Number and Street, City, State, Zip Code)
799 Redmond Street TEANECK NJ 07666

*(Area) Day Telephone _____ *(Area) Evening Telephone _____

County Bergen Legal Name of Election District or Municipality Township of TEANECK

Election Date 5-8-2012 Political Party, if any NONE Office Sought Council person

Election Type (CHECK ONE)
 Primary General Municipal Run-Off School Fire District Special Amendment
 Yes No

CHAIRPERSON

Name Fatima Yasmeen Al-Shehab

Mailing Address 260 Herrick Ave

City TEANECK State New Jersey Zip Code 07666

*(Area) Day Telephone _____ *(Area) Evening Telephone _____

TREASURER

Name Ken Hoffmann

Mailing Address 956 Phelps Road TEANECK NJ 07666

City TEANECK State New Jersey Zip Code 07666

*(Area) Day Telephone _____ *(Area) Evening Telephone _____

Resident Address 956 Phelps Road

City TEANECK State New Jersey Zip Code 07666

DEPOSITORY INFORMATION

Name of Bank or Depository Chase

Mailing Address 505 Main Street

City HACKENSACK State New Jersey Zip Code 07601

(Area) Day Telephone _____

Account Name Committee To Re Elect Mohammed Hameeduddin Account Number 983899287

ORIGINAL

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

Name <i>Mohammed Hameeduddin</i>		
Mailing Address <i>799 Redmond Street</i>		
City <i>TEANECK</i>	State <i>New Jersey</i>	Zip Code <i>07666</i>
*(Area) Day Telephone	*(Area) Evening Telephone	

Name <i>Ken Hoffman</i>		
Mailing Address <i>956 Phelps Rd</i>		
City <i>TEANECK</i>	State <i>New Jersey</i>	Zip Code <i>07666</i>
*(Area) Day Telephone	*(Area) Evening Telephone	

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

CANDIDATE CERTIFICATION

I certify that the statements on this document are true. I further certify that I have not, and will not during the existence of the candidate committee, establish, authorize the establishment of, maintain, or participate directly or indirectly in the management or control of any political committee or continuing political committee. I am aware that if any of the statements are willfully false, I may be subject to punishment.

4-1-2012
DATE

Mohammed Hameeduddin
PRINT FULL NAME (CANDIDATE)

[Signature]
SIGNATURE (CANDIDATE)

CHAIRPERSON/TREASURER CERTIFICATION

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

4-1-2012
DATE

Fatima Vasmeen Al-Shehab
PRINT FULL NAME (CHAIRPERSON)

[Signature]
SIGNATURE (CHAIRPERSON)

4-1-2012
DATE

Kenneth Robert Hoffman
PRINT FULL NAME (TREASURER)

[Signature]
SIGNATURE (TREASURER)

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

ORIGINAL

ORIGINAL

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE) <input type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr 15, _____ <input type="checkbox"/> July 15, _____ <input type="checkbox"/> Oct 15, _____ <input type="checkbox"/> Jan 15, _____
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/		
CANDIDATE OR COMMITTEE NAME <i>Committee To Re Elect Mohammed Hameeduddin</i>		
STREET ADDRESS <i>799 Redmond Street</i>		Amendment Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
CITY <i>Teaneck</i>	STATE <i>NJ</i>	ZIP CODE <i>07666</i>
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY <i>Township of Teaneck</i>	
POLITICAL PARTY, IF ANY <i>NONE</i>	OFFICE SOUGHT <i>Council person</i>	
ELECTION DATE <i>5-8-2012</i>	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL <input type="checkbox"/> FIRE DISTRICT

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ELEC RECEIVED
APR 19 2012

SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED

TABLE I. RECEIPTS	THIS REPORT	CUMULATIVE TO DATE
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS	\$ 100. ⁰⁰ / ₁₀₀	\$ 100
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 5,100. ⁰⁰ / ₁₀₀	\$ 5,100. ⁰⁰ / ₁₀₀
3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ —	\$ —
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ —	\$ —
5 LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ —	\$ —
6 SUB TOTAL (ADD LINES 1 THRU 5)	\$ 5,200. ⁰⁰ / ₁₀₀	\$ 5,200. ⁰⁰ / ₁₀₀
7 REFUND OF EXCESSIVE CONTRIBUTIONS [Adjustment Schedule] (-)	\$ —	\$ —
8 TOTAL CONTRIBUTIONS	\$ 5,200. ⁰⁰ / ₁₀₀	\$ 5,200. ⁰⁰ / ₁₀₀
9 ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (*)	\$ —	\$ —
10 TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 5,200. ⁰⁰ / ₁₀₀	\$ 5,200. ⁰⁰ / ₁₀₀

TABLE II. EXPENDITURES	THIS REPORT	CUMULATIVE TO DATE
1 DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 2,764. ¹⁷ / ₁₀₀	\$ 2,764. ¹⁷ / ₁₀₀
2 DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 0	\$ 0
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ 100. ⁰⁰ / ₁₀₀	\$ 100. ⁰⁰ / ₁₀₀
4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 0	\$ 0
5 IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ 0	\$ 0
6 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ 0	\$ 0
7 SUB TOTAL (ADD LINES 1 THRU 6)	\$ 2,864. ¹⁷ / ₁₀₀	\$ 2,864. ¹⁷ / ₁₀₀
8 REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9 TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 2,864. ¹⁷ / ₁₀₀	\$ 2,864. ¹⁷ / ₁₀₀

SCHEDULE A

ORIGINAL

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

CONTRIBUTOR NAME <i>Ali Siddiqui</i>			EMPLOYER NAME <i>Vship Inc</i>	
CONTRIBUTOR ADDRESS <i>991 Alpine Dr.</i>			EMPLOYER ADDRESS <i>36-36 33rd Street</i>	
<i>Teaneck NJ 07666</i>			<i>Astoria</i>	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 2600.00/100	DATE(S) RECEIVED <i>3/20/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>2600.00/100</i>
OCCUPATION <i>Business Owner</i>				
CONTRIBUTOR NAME <i>Amber Sheikh</i>			EMPLOYER NAME <i>Housewife</i>	
CONTRIBUTOR ADDRESS <i>141 Teaneck Rd</i>			EMPLOYER ADDRESS <i>141 Teaneck Rd</i>	
<i>Teaneck NJ 07666</i>			<i>Teaneck NJ 07666</i>	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>3/20/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>1000.00/100</i>
OCCUPATION <i>Housewife</i>				
CONTRIBUTOR NAME <i>JUNED QAZI</i>			EMPLOYER NAME <i>NYC TECH Construction Corp</i>	
CONTRIBUTOR ADDRESS <i>17 Vancouver Rd</i>			EMPLOYER ADDRESS <i>252 West 38th Street</i>	
<i>Morganville NJ 07751</i>			<i>New York NY 10018</i>	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>3/20/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>1500.00/100</i>
OCCUPATION <i>Business Owner</i>				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ <i>5100.00/100</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ <i>5100.00/100</i>


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

Original

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

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

Original

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

ADJUSTMENT SCHEDULE
Refund of Excessive Contributions

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
			\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
3-20-2012	EFT	CHASE 505 MAIN ST HACKENSACK NJ 07601	Checking Supplies	\$ 11,501/100	\$	\$
3-26-2012	EFT	CANOS MAGIC 6224 FT Hamilton Parkway Brooklyn NY 11219	Kids Entertainment for Kick off Party	200 00/100		
3-26-2012	EFT	RediPrint 113 Hudson St Hackensack NJ 07601	CAMPAIGN MATERIALS	267 59/100		
3-26-2012	EFT 1002	VITALIS Restaurant 293 Queen Anne Ad Teaneck NJ 07666	Kick off Party	1,918 59/100 1,918 59/100		
3-27-2012	EFT	Chopstky 172 W Englewood Ave Teaneck NJ 07666	Kosher Food For Kick off Party	200 00/100		
3-27-2012	EFT	Tower Copy East 115 West 45th St Suite 502 New York NY 10036	CAMPAIGN MATERIALS	166 58/100		
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 2,764.17/100	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 2,764.17/100	\$

SCHEDULE 2(D) - DISBURSEMENTS

Other

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$	\$	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				\$ 0	\$ 0	\$ 0

SCHEDULE 3(D) - DISBURSEMENTS

Contributions made to other Candidates/Committees

PAYMENT DATE	CHECK NO	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
3-25-2012	1001	Committee to Elect Monica Honis	906 Perry Ln Kenick NJ 07666	\$ 100.00/100
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 100.00/100
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED				
SCHEDULE 3(D) GRAND TOTAL				1 \$ _____
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2 \$ _____
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3 \$ 100.00/100

SCHEDULE E
Outstanding Obligations

Date Incurred	Creditor's Name	Address	Description	Amount
3-28-2012	Mohammed Hameedullah	799 Redmond Street Trenton NJ 07616	LAWN SIGNS	\$ 3,000.00/100
3-29-2012	Cadet Marketing Inc	183 Market St Saddle Brook NJ 07663	CAMPAIGN CHAIRS WATER BOTTLES & JAR OPENERS	689.08/100
TOTAL OUTSTANDING OBLIGATIONS				\$ 3,689.08/100

SCHEDULE F
Refunded Disbursements

Date	Full Name	Address	Description	Amount
				\$
SCHEDULE F TOTAL				\$ 0

SCHEDULE G
Recipients of In-Kind Contributions


NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero)	\$ <u>0</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>5200.00/100</u>
Disbursements (Include bank charges)	\$ <u>2,864.17/100</u>
Closing Balance, this Report	\$ <u>2,335.83/100</u>
<u>Chase</u> NAME OF BANK OR DEPOSITORY	<u>Committee to Elect Mohammed Hameeduddin</u> NAME OF ACCOUNT
<u>505 Main Street Hackensack NJ 07601</u> ADDRESS OF BANK OR DEPOSITORY	
<u>Ken Hoffman</u> NAME OF TREASURER	*TELEPHONE NUMBER (DAY)
<u>956 Phelps Rd Teaneck NJ 07666</u> ADDRESS OF TREASURER	

CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

<u>9-2-2012</u> DATE	<u>Mohammed Hameeduddin</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
<u>9-2-2012</u> DATE	<u>Ken Hoffman</u> PRINT FULL NAME (TREASURER)	<u>Ken Hoffman</u> SIGNATURE (TREASURER)
_____ DATE	_____ PRINT FULL NAME (TREASURER)	_____ SIGNATURE (TREASURER)

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

DECLARATION OF FINAL REPORT

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

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

<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
<u> </u> DATE	<u> </u> PRINT FULL NAME (TREASURER)	<u> </u> SIGNATURE (TREASURER)

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE) <input type="checkbox"/> 29 - DAY PRE-ELECTION <input checked="" type="checkbox"/> 11 - DAY PRE-ELECTION <input type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr 15, _____ <input type="checkbox"/> July 15, _____ <input type="checkbox"/> Oct 15, _____ <input type="checkbox"/> Jan. 15, _____
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/		
CANDIDATE OR COMMITTEE NAME <i>Committee To Elect Mohammed Hammouch</i>		
STREET ADDRESS <i>799 Redmond Street</i>		Amendment Yes <input type="checkbox"/> No <input type="checkbox"/>
CITY <i>Teaneck</i>	STATE <i>NJ</i>	ZIP CODE <i>07666</i>
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY <i>TEANECK</i>	
POLITICAL PARTY, IF ANY <i>NONE</i>	OFFICE SOUGHT <i>Council</i>	
ELECTION DATE <i>5-8-2012</i>	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL
SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED		
TABLE I. RECEIPTS		
	THIS REPORT	CUMULATIVE TO DATE
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS	\$ 2,705. ⁰⁰ / ₁₀₀	\$ 2,805. ⁰⁰ / ₁₀₀
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 5600. ⁰⁰ / ₁₀₀	\$ 10,700. ⁰⁰ / ₁₀₀
3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ 0	\$
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ 0	\$
5 LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$	\$
6 SUB TOTAL (ADD LINES 1 THRU 5)	\$ 8305. ⁰⁰ / ₁₀₀	\$ 12,505. ⁰⁰ / ₁₀₀
7 REFUND OF EXCESSIVE CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 1000. ⁰⁰ / ₁₀₀	\$ 1000. ⁰⁰ / ₁₀₀
8 TOTAL CONTRIBUTIONS	\$ 7305. ⁰⁰ / ₁₀₀	\$ 11,505. ⁰⁰ / ₁₀₀
9 ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10 TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 7305. ⁰⁰ / ₁₀₀	\$ 11,505. ⁰⁰ / ₁₀₀
TABLE II. EXPENDITURES		
1 DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 1,276.11	\$ 40,35.28
2 DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 0	\$ 0
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ 0	\$ 100. ⁰⁰ / ₁₀₀
4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 0	\$ 0
5 IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ 0	\$ 0
6 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ 0	\$ 0
7 SUB TOTAL (ADD LINES 1 THRU 6)	\$ 0	\$ 0
8 REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9 TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 1,276. ¹¹ / ₁₀₀	\$ 4,135. ²⁸ / ₁₀₀

SCHEDULE A


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

CONTRIBUTOR NAME Khara Khateeb		EMPLOYER NAME Thomas Drugs	
CONTRIBUTOR ADDRESS 724 PASCACK Rd		EMPLOYER ADDRESS 171 Columbus Drive	
Paramus NJ 07652		New York, NY 10023	
<input type="checkbox"/> CHECK IF CURRENCY	<input type="checkbox"/> AGGREGATE AMOUNT \$ 1000.00/100	DATE(S) RECEIVED 4-13-2012	AMOUNT(S) RECEIVED THIS PERIOD \$ 1000.00/100
OCCUPATION Business Owner			
CONTRIBUTOR NAME Ammar Antami		EMPLOYER NAME Spirit Tex LLC	
CONTRIBUTOR ADDRESS 82 Fycke Lane		EMPLOYER ADDRESS 100 Riser Rd	
Teaneck NJ 07666		Little Ferry NJ 07643	
<input type="checkbox"/> CHECK IF CURRENCY	<input type="checkbox"/> AGGREGATE AMOUNT \$	DATE(S) RECEIVED 4-13-2012	AMOUNT(S) RECEIVED THIS PERIOD \$ 1000.00/100
OCCUPATION Business owner			
CONTRIBUTOR NAME Mohammed Sadiqulla		EMPLOYER NAME Revise Clothing Inc	
CONTRIBUTOR ADDRESS 94 JACKSON Drive		EMPLOYER ADDRESS 1466 Broadway	
Cresskill NJ 07626		New York NY 10036	
<input type="checkbox"/> CHECK IF CURRENCY	<input type="checkbox"/> AGGREGATE AMOUNT \$	DATE(S) RECEIVED 4-13-2012	AMOUNT(S) RECEIVED THIS PERIOD \$ 2600.00/100
OCCUPATION Business owner			
CONTRIBUTOR NAME Rudina Odeh-RAMADAN		EMPLOYER NAME Columbia University Medical Center	
CONTRIBUTOR ADDRESS 5900 Arlington Ave Apt 22V		EMPLOYER ADDRESS 161 East Washington Ave	
Riverdale NY 10471		New York NY 10032	
<input type="checkbox"/> CHECK IF CURRENCY	<input type="checkbox"/> AGGREGATE AMOUNT \$	DATE(S) RECEIVED 4-16-2012	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00/100
OCCUPATION Doctor of Pharmacology			
CONTRIBUTOR NAME Nuri Mitha		EMPLOYER NAME N/A	
CONTRIBUTOR ADDRESS 400 Windermere Dr.		EMPLOYER ADDRESS N/A	
Lakeland FL 33809			
<input type="checkbox"/> CHECK IF CURRENCY	<input type="checkbox"/> AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$ 500.00/100
OCCUPATION Housewife			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 5600.00/100
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 5600.00/100

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

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

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

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

ADJUSTMENT SCHEDULE
Refund of Excessive Contributions

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
4-15-2012	1006	Amber Sheikh 141 Teaneck Rd Teaneck NJ 07666	\$ 1000. ⁰⁰ / ₁₀₀
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 1000. ⁰⁰ / ₁₀₀
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1000. ⁰⁰ / ₁₀₀

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
4-10-2012	EFT	GO DADDY.COM HUDSON	Website Hosting	\$ 68.28	\$ 0	\$ 0
4-17-2012	EFT	Hayden Rd 51E & 19 Scotland AZ 85260	Website design	208.33		
4-24-2012	EFT	ODESK.COM 901 Marshall St. Suite 200 Richmond CA 94803	CAMPAIGN MATERIALS	107.00		
4-24-2012	EFT	Redi Print 113 Hudson Street Hackensack NJ 07601	web Ad for Patch.com	887.50/100		
		Patch Media Group				
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 1271.11	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 1271.11	\$ 0

SCHEDULE 2(D) - DISBURSEMENTS

Other

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
				\$ 0	\$ 0	\$ 0
				\$ 0	\$ 0	\$ 0
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE		
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL		

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

PAYMENT DATE	CHECK NO	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
				\$ 0
(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ 0
TOTAL, THIS PAGE				\$ 0
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED				
SCHEDULE 3(D) GRAND TOTAL				1 \$ 0
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2 \$ 0
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3 \$ 0

SCHEDULE E
Outstanding Obligations

Date Incurred	Creditor's Name	Address	Description	Amount
3-28-2012	Mohammed Hameedulla	799 Redmond Street TEANECK NJ 07666	LANN Signs	\$ 3,000. ⁰⁰ / ₁₀₀
3-29-2012	Cadett Marketing	183 Market Street Saddle Brook NJ 07663	CAMPAIGN CHAKIS, WATER BOTTLES & JAR OPENERS	689. ⁰⁸ / ₁₀₀
			TOTAL OUTSTANDING OBLIGATIONS	\$ 3,689. ⁰⁸ / ₁₀₀

SCHEDULE F
Refunded Disbursements

Date	Full Name	Address	Description	Amount
				\$
			SCHEDULE F TOTAL	\$ 0

SCHEDULE G
Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report
 (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero) \$ 2,335.83/100

Funds Transferred from Prior Campaign \$ 0

Deposits (Include interest) \$ 8,305.00/100

Disbursements (Include bank charges) \$ 1,276.11/100

Closing Balance, this Report \$ 7,029.11/100

Chase Committee To Elect Mohammed Alhamedkhalifa
 NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT

505 Main St Hackensack NJ 07601
 ADDRESS OF BANK OR DEPOSITORY

Ken Hoffman
 NAME OF TREASURER

956 Phelps Rd Tenarock NJ 07666 *TELEPHONE NUMBER (DAY)
 ADDRESS OF TREASURER

CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

<u>9/24/2012</u> DATE	<u>Mohammed Alhamedkhalifa</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
_____	_____	_____
_____	_____	_____
<u>9/24/2012</u> DATE	<u>Ken Hoffman</u> PRINT FULL NAME (TREASURER)	<u>Ken Hoffman</u> SIGNATURE (TREASURER)

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

DECLARATION OF FINAL REPORT

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

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

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

Original

FORM R-1		REPORT OF CONTRIBUTIONS AND EXPENDITURES		REPORT (CHECK ONE)	
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/				<input type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input checked="" type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr 15, _____ <input type="checkbox"/> July 15, _____ <input type="checkbox"/> Oct 15, _____ <input type="checkbox"/> Jan 15, _____	
CANDIDATE OR COMMITTEE NAME <i>Committee To Elect Mohammed Hameeduddin</i>				Amendment Yes <input type="checkbox"/> No <input type="checkbox"/>	
STREET ADDRESS <i>799 Redmond Street</i>				For State Use Only ELEC RECEIVED JUN 21 2012	
CITY <i>Teaneck</i>	STATE <i>NJ</i>	ZIP CODE <i>07666</i>			
COUNTY <i>Bergen</i>	ELECTION DISTRICT OR MUNICIPALITY <i>Township of Teaneck</i>				
POLITICAL PARTY, IF ANY <i>NONE</i>	OFFICE SOUGHT <i>Council Person</i>				
ELECTION DATE <i>5-8-2012</i>	ELECTION TYPE (CHECK ONE)	<input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL	<input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT	<input type="checkbox"/> SPECIAL
SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED					
TABLE I. RECEIPTS			THIS REPORT	CUMULATIVE TO DATE	
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS			\$ <i>4660.04/100</i>	\$ <i>7,465.00/100</i>	
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]			\$ <i>4200.00/100</i>	\$ <i>14,900.00/100</i>	
3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS			\$ <i>0</i>	\$ <i>0</i>	
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]			\$ <i>0</i>	\$ <i>0</i>	
5 LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]			\$ <i>0</i>	\$ <i>0</i>	
6 SUB TOTAL (ADD LINES 1 THRU 5)			\$ <i>8860.04/100</i>	\$ <i>22,365.00/100</i>	
7 REFUND OF EXCESSIVE CONTRIBUTIONS [Adjustment Schedule] (-)			\$ <i>0</i>	\$ <i>1000.00/100</i>	
8 TOTAL CONTRIBUTIONS			\$ <i>8860.04/100</i>	\$ <i>21,365.00/100</i>	
9 ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)			\$ <i>0</i>	\$ <i>0</i>	
10 TOTAL RECEIPTS (ADD LINE 8 + LINE 9)			\$ <i>8860.04/100</i>	\$ <i>21,365.00/100</i>	
TABLE II EXPENDITURES					
1 DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]			\$ <i>14,491.28/100</i>	\$ <i>18,526.56/100</i>	
2 DISBURSEMENTS - OTHER [Schedule 2(D)]			\$ <i>0</i>	\$ <i>0</i>	
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]			\$ <i>0</i>	\$ <i>100.00/100</i>	
4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]			\$ <i>0</i>	\$ <i>0</i>	
5 IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)			\$ <i>0</i>	\$ <i>0</i>	
6 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)			\$ <i>0</i>	\$ <i>0</i>	
7 SUB TOTAL (ADD LINES 1 THRU 6)			\$ <i>14,491.28/100</i>	\$ <i>18,626.56/100</i>	
8 REFUNDED DISBURSEMENTS [Schedule F] (-)			\$ <i>0</i>	\$ <i>0</i>	
9 TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)			\$ <i>14,491.28/100</i>	\$ <i>18,626.56/100</i>	

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

CONTRIBUTOR NAME <i>Adnan Chowdhury</i>		EMPLOYER NAME <i>NEC America</i>		
CONTRIBUTOR ADDRESS <i>310 Fabry Terrace</i>		EMPLOYER ADDRESS <i>130 Clinton Rd</i>		
<i>Teaneck NJ 07666</i>		<i>Fairfield NJ 07007</i>		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500.00/100	DATE(S) RECEIVED <i>5/22/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>500.00/100</i>
OCCUPATION				
CONTRIBUTOR NAME <i>Imran Siddiqui</i>		EMPLOYER NAME <i>7-11</i>		
CONTRIBUTOR ADDRESS <i>281 Park St</i>		EMPLOYER ADDRESS <i>1274 Teaneck Rd</i>		
<i>Hackensack NJ 07601</i>		<i>Teaneck NJ 07666</i>		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>5/22/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>500.00/100</i>
OCCUPATION <i>Business Owner</i>				
CONTRIBUTOR NAME <i>Zahid Qureshi</i>		EMPLOYER NAME <i>ZZS Properties LLC</i>		
CONTRIBUTOR ADDRESS <i>7735 NW 47th Ave Coral</i>		EMPLOYER ADDRESS <i>2201 NE 52nd Suite 206</i>		
<i>Coral Springs FL 33067</i>		<i>Light House Point FL 33064</i>		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>5/22/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>1000.00/100</i>
OCCUPATION <i>Owner Business Owner</i>				
CONTRIBUTOR NAME <i>Ahmad Koshul</i>		EMPLOYER NAME <i>BMS Associates</i>		
CONTRIBUTOR ADDRESS <i>238 Park Ave</i>		EMPLOYER ADDRESS <i>1324 Teaneck Rd</i>		
<i>Teaneck NJ 07666</i>		<i>Teaneck NJ 07666</i>		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>5/22/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>400.00/100</i>
OCCUPATION <i>Business Owner</i>				
CONTRIBUTOR NAME <i>Nikhil Sultana Bag</i>		EMPLOYER NAME <i>Mohammed I Bag M.B.P.A Inc</i>		
CONTRIBUTOR ADDRESS <i>3466 NW 122nd Ave</i>		EMPLOYER ADDRESS <i>4100 S. Hospital Drive Suite 300</i>		
<i>Sunrise FL 33304</i>		<i>Plantation FL 33317</i>		
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED <i>5/22/2012</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>1000.00/100</i>
OCCUPATION <i>Physician</i>				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE		\$ <i>3400.00/100</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL		\$ <i>_____</i>

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

original

CONTRIBUTOR NAME <i>Meher SULTANA</i>			EMPLOYER NAME <i>N/A</i>	
CONTRIBUTOR ADDRESS <i>83 Gable Blvd</i>			EMPLOYER ADDRESS <i>N/A</i>	
<i>Weston FL 33326</i>			<i>N/A</i>	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION <i>House wife</i>			<i>5/22/2011</i>	<i>1000.00/100</i>
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ <i>1000.00/100</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ <i>4200.00/100</i>

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

Original

CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <u>00</u>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ <u>00</u>

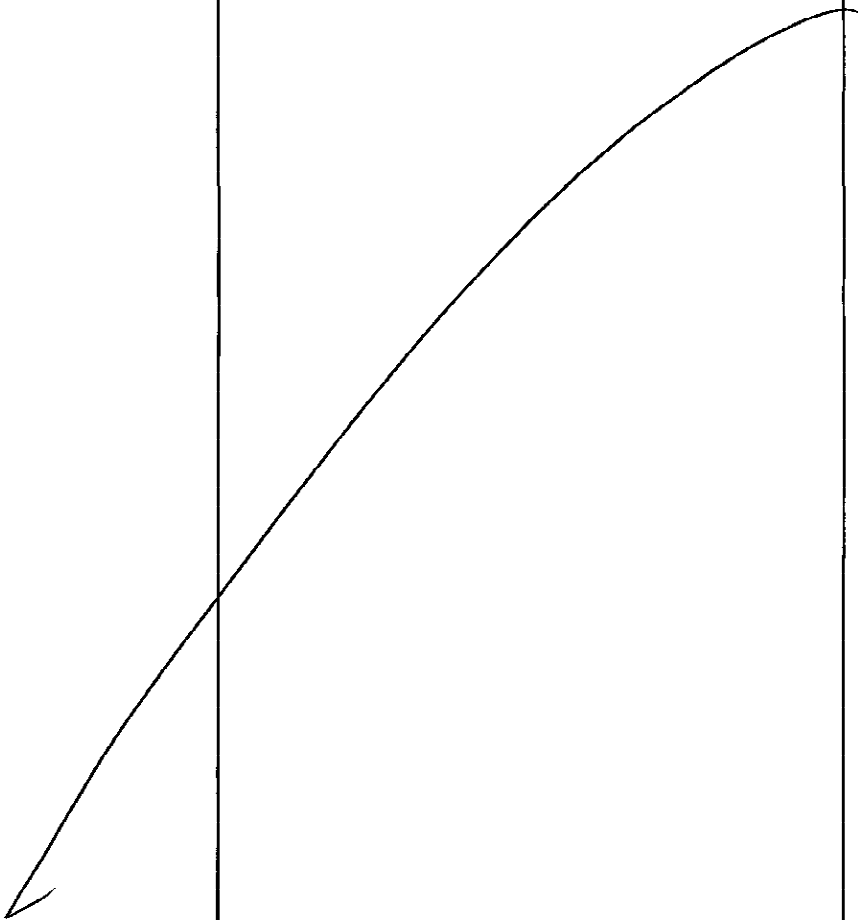
Original

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

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

ADJUSTMENT SCHEDULE
Refund of Excessive Contributions

Original

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
			\$
			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <u> </u>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ <u> </u>

Original

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
4-15-2012	1006	CADET Marketing 183 Market Street Saddle Brook NJ 07663	Campaign Chris Waterbodies & JAR OPENS	\$ 689. ⁰⁸	\$	\$
4-30-2012	1007	Mohammed Hameeduddin 799 Redwans St Teaneck NJ 07666	Lawn Signs - reimbursement	2,988. ^{00/100}		
5-1-2012	EFT	North Jersey Media Group 150 River St Hackensack NJ 07601	Advertising Suburbante	457 04/100		
5-1-2012	EFT	Redi Print 113 Hudson St Hackensack NJ 07601	Marketing Materials	133. ⁷⁵		
5-2-2012	EFT	The Newark Standard 1076 Newark Rd Teaneck NJ 07666	Newspaper Ad	717. ^{00/100}		
5-3-2012	EFT	STAPLES 460 Hackensack Ave Hackensack NJ 07601	OFFICE SUPPLIES For campaign Paper, CAMPAIGN MATERIALS	111. 59/100		
5-3-2012	EFT	Tower Copy East New York 115 W 95th St #502 New York NY 10036	Food For cottage Party	425. 70/100		
5-3-2012	EFT	Costco Wholesale Hackensack 80 S. River St Hackensack NJ 07601	advertising	154. 68/100		
5-4-2012	EFT	FaceBook-1601 Willowd Millw Park CA 94025	Pizza for workers/volunteers	50. ^{00/100}		
5-4-2012	EFT	Rappa John's Teaneck 376 Queen Anne Rd Teaneck NJ 07666		15. ⁰⁰		
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 6042. 44/100	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 6042. 44/100	\$

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

Original

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5-4-2012	EFT	Costco Wholesale - Hackensack 70 S River St Hackensack, NJ 07601	Food For college Party + Volunteers	\$ 134.53/100	\$	\$
5-7-2012	EFT	Chase Deposit returned	Donation check Bounced	250.00/100		
5-7-2012	EFT	FACE BOOK 1601 Willow Rd Menlo PARK CA 94025	Advertising	50.00/100		
5-7-2012	EFT	FACEBOOK-1601 Willow Rd Menlo PARK CA 94025	Web Advertising	50.00/100		
5-7-2012	EFT	Dunkin Donuts 1406 Tennessee Rd Tennessee 07606	Breakfast for Volunteers	32.02/100		
5-7-2012	EFT	FACE BOOK-1601 Willow Rd Menlo PARK CA 94025	Advertising Web	50.00/100		
5-7-2012	EFT	FACE BOOK-1601 Willow Rd Menlo PARK CA 94025	Advertising Web	50.00/100		
5-7-2012	EFT	Returned Check Fee Chase	Fee For Bounced Check	12.00/100		
5-7-2012	EFT	Chopstix Tennessee 172 W. Highland Ave Tennessee NJ 07606	Lunch for observant Volunteer	13.32/100		
5-8-2012	EFT	FACE BOOK	web Advertising	99.85/100		
5-8-2012	1018	Juliana Lewis 835 River Rd Tennessee NJ 07606	5.5 hrs Canvassing	55.00/100		
5-8-2012	1014	Isiah Adkins 250 Vanbuskirk Rd Tennessee NJ 07606	15.5 hrs Canvassing	150.50/100		
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 896.72/100	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$	\$

Original

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5-8-2012	1013	Alexis Lloyd 252 Intervale Rd Teaneck NJ 07666	6 hrs Canvassing	\$ 60.00/100	\$	\$
5-8-2012	1016	Rebecca Owen 140 Weyland Ave Teaneck NJ 07666	15 hrs. Canvassing	150 00/100		
5-8-2012	1008	Ashley Abraham 100 Newark Ave Teaneck NJ 07666	6 hrs Canvassing	60.00/100		
5-8-2012	1011	Chris Cole 524 Kipp St Teaneck NJ 07666	11.5 hrs Canvassing	110.50/100		
5-8-2012	1027	Samantha Wilkerson 1778 Liberty Rd Teaneck NJ 07666	20 hrs Canvassing	200 00/100		
5-23-2012	1020	All County Media 77 Hudson St Hackensack NJ 07601	Mailings, Printing and Robocalls.	5,385.02/100		
5-8-2012	1009	Lexi Amadi, 1257 Longfellow Rd Teaneck NJ 07666	22.5 hrs Canvassing	220.50/100		
5-8-2012	1010	Maxi Amadi, 1257 Longfellow Rd Teaneck NJ 07666	21.5 hrs Canvassing	210.50/100		
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 6,397.12/100	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$	\$

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

Original Original

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
5-23-2012	1030	Golden Grill 1379 Queen Anne Rd Teaneck NJ 07666	Dinner Meet the Candidate	\$ 175. ⁰⁰ / ₁₀₀	\$	\$
5-23-2012	1028	Masera Subhanidos Fyfe Lane Teaneck NJ 07666	to two Campaign	100 ⁰⁰ / ₁₀₀		
5-23-2012	1021	Vinyand Pirmal 341 Cottlands St Belleville NJ 07109 Cola graphics design.	Printing Campaign Materials	280 ⁰⁰ / ₁₀₀		
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 555. ⁰⁰ / ₁₀₀	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$ 14,491. ²⁸ / ₁₀₀	\$

SCHEDULE 2(D) - DISBURSEMENTS

Other

orig
original

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
				\$	\$	\$
				TOTAL, THIS PAGE	\$	\$
				GRAND TOTAL	\$	\$

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

original

PAYMENT DATE	CHECK NO	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT

(COMPLETE THIS LINE FOR EVERY PAGE USED)				\$ _____
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED				
SCHEDULE 3(D) GRAND TOTAL				1 \$ 0
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				2 \$ 0
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				3 \$ 0

SCHEDULE E
Outstanding Obligations

original

Date Incurred	Creditor's Name	Address	Description	Amount
				\$
TOTAL OUTSTANDING OBLIGATIONS				\$ 0

SCHEDULE F
Refunded Disbursements

Date	Full Name	Address	Description	Amount
				\$
SCHEDULE F TOTAL				\$ 0

SCHEDULE G
Recipients of In-Kind Contributions

Original


NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report <small>(Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero)</small>	\$ 7,029. ¹¹ / ₁₀₀
Funds Transferred from Prior Campaign	\$ 0
Deposits (Include interest)	\$ 8,860. ⁰⁴ / ₁₀₀
Disbursements (Include bank charges)	\$ 14,491. ²⁸ / ₁₀₀
Closing Balance, this Report	\$ 1,397. ⁸⁷ / ₁₀₀
<u>Chase</u> NAME OF BANK OR DEPOSITORY	<u>Committee To Elect Mohammad Hameeduddin</u> NAME OF ACCOUNT
<u>505 MAIN St Hackensack NJ 07601</u> ADDRESS OF BANK OR DEPOSITORY	
<u>Kew Hoffman</u> NAME OF TREASURER	_____ *TELEPHONE NUMBER (DAY)
<u>956 Phelps Rd TEANECK NJ 07606</u> ADDRESS OF TREASURER	

CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

<u>6/19/2012</u> DATE	<u>Mohammad Hameeduddin</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
<u>06/19/2012</u> DATE	<u>Kenneth Robert Hoffman</u> PRINT FULL NAME (TREASURER)	<u>Kenneth Robert Hoffman</u> SIGNATURE (TREASURER)

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

DECLARATION OF FINAL REPORT

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

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

<u> </u> DATE	<u> </u> PRINT FULL NAME (CANDIDATE)	<u> </u> SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (TREASURER)	<u> </u> SIGNATURE (TREASURER)



ORIGINAL

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE) <input type="checkbox"/> 29 - DAY PRE-ELECTION <input type="checkbox"/> 11 - DAY PRE-ELECTION <input type="checkbox"/> 20 - DAY POST-ELECTION <input type="checkbox"/> Apr 15, _____ <input checked="" type="checkbox"/> July 15, <u>2012</u> <input type="checkbox"/> Oct 15, _____ <input type="checkbox"/> Jan 15, _____
NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION P O Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) Web site http://www.elec.state.nj.us/		Amendment Yes <input type="checkbox"/> No <input type="checkbox"/> For State Use Only ELEC RECEIVED AUG - 2 2012
CANDIDATE OR COMMITTEE NAME <u>Committee To Elect Mohammed Hameeduddin</u> STREET ADDRESS <u>799 Redmond St</u> CITY <u>Teaneck</u> STATE <u>NJ</u> ZIP CODE <u>07666</u> COUNTY <u>Bergen</u> ELECTION DISTRICT OR MUNICIPALITY <u>Township of Teaneck</u> POLITICAL PARTY, IF ANY <u>None</u> OFFICE SOUGHT <u>Council</u>		
ELECTION DATE	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> RUN-OFF	<input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL

SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED

TABLE I. RECEIPTS	THIS REPORT	CUMULATIVE TO DATE
1 MONETARY CONTRIBUTIONS OF \$300 OR LESS	\$ 0	\$ 7,465.00/100
2 MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 0	\$ 14,900.00/100
3 IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ 0	\$ 0
4 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ 0	\$ 0
5 LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ 0	\$ 0
6 SUB TOTAL (ADD LINES 1 THRU 5)	\$ 0	\$ 23,365.00/100
7 REFUND OF EXCESSIVE CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 1,000.00/100
8 TOTAL CONTRIBUTIONS	\$ 0	\$ 21,365.00/100
9 ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10 TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 0	\$ 21,365.00/100

TABLE II. EXPENDITURES	THIS REPORT	CUMULATIVE TO DATE
1 DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 0	\$ 18,526.56/100
2 DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 0	\$ 0
3 DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ 0	\$ 100.00/100
4 CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 0	\$ 0
5 IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ 0	\$ 0
6 IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ 0	\$ 0
7 SUB TOTAL (ADD LINES 1 THRU 6)	\$ 0	\$ 18,626.56/100
8 REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9 TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 0	\$ 18,626.56/100

SCHEDULE A


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

CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)			TOTAL, THIS PAGE	\$ 3
(COMPLETE THIS LINE FOR LAST PAGE USED)			GRAND TOTAL	\$ 0

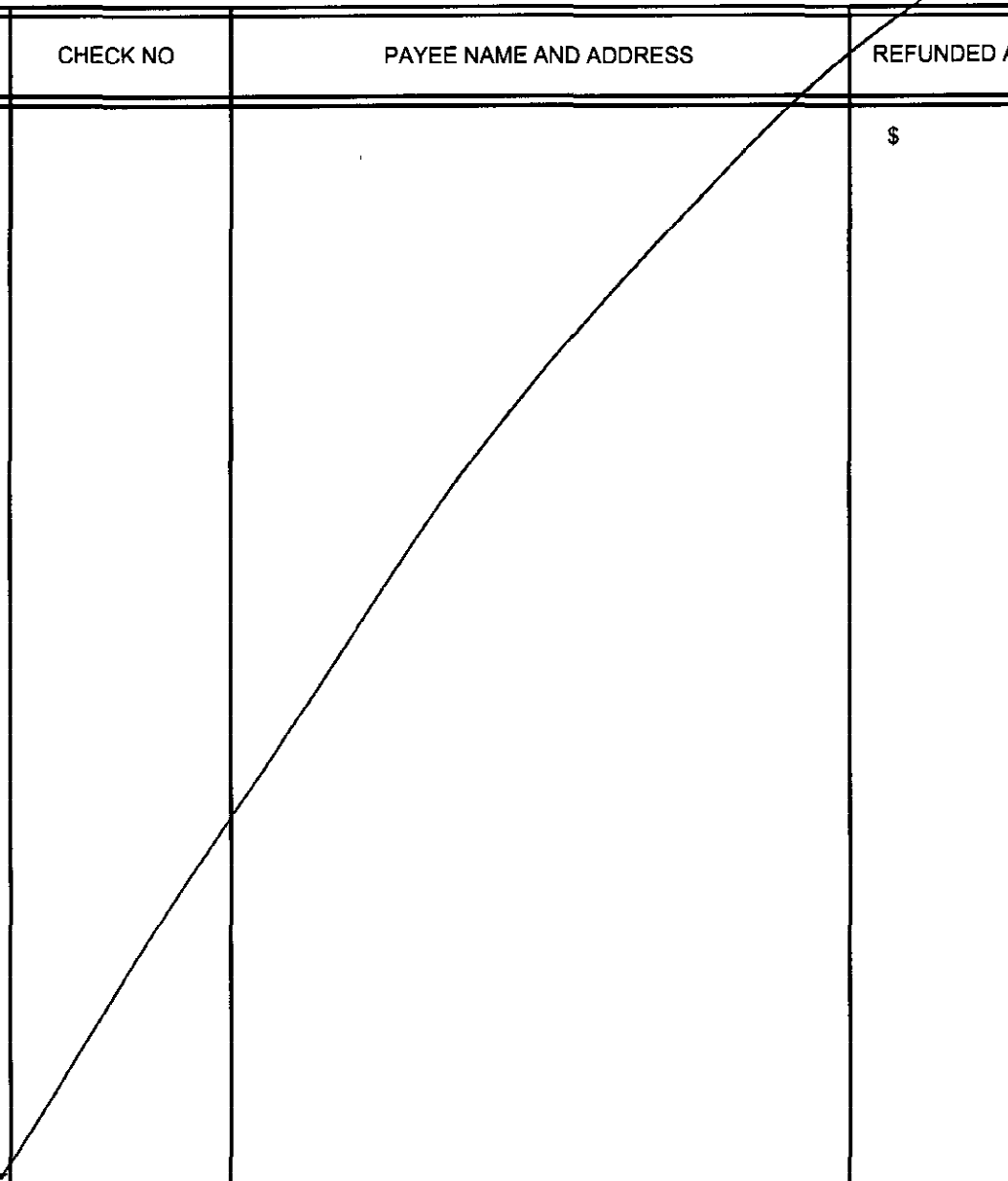
SCHEDULE B
In-Kind Contributions in Excess of \$300

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

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

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

ADJUSTMENT SCHEDULE
Refund of Excessive Contributions

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	REFUNDED AMOUNT
			\$
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 0
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 0

SCHEDULE 1(D) - DISBURSEMENTS
Campaign Expenses

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
				TOTAL, THIS PAGE	\$ 0	\$
				GRAND TOTAL	\$ 0	\$

SCHEDULE 2(D) - DISBURSEMENTS

Other

PAYMENT DATE	CHECK NO	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
				\$ 0	\$	\$
				\$ 0	\$	\$
				TOTAL, THIS PAGE	\$	\$
				GRAND TOTAL	\$	\$

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

PAYMENT DATE	CHECK NO	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
(COMPLETE THIS LINE FOR EVERY PAGE USED)				
TOTAL, THIS PAGE				
(COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED)				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				

1 \$ 0
2 \$ 0
3 \$ 0

SCHEDULE E
Outstanding Obligations

Date Incurred	Creditor's Name	Address	Description	Amount
				\$
				TOTAL OUTSTANDING OBLIGATIONS \$

SCHEDULE F
Refunded Disbursements

Date	Full Name	Address	Description	Amount
				\$
				SCHEDULE F TOTAL \$

SCHEDULE G
Recipients of In-Kind Contributions

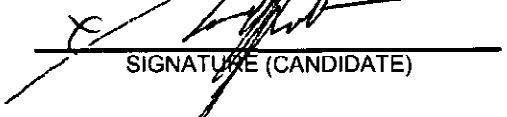
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ 0
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ 0
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ 0
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$
NAME OF RECIPIENT CANDIDATE/COMMITTEE		
MAILING ADDRESS		
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIPALITY	
CHECK NUMBER	PAYMENT DATE	AMOUNT \$ 0

STATEMENT OF CAMPAIGN DEPOSITORY AND CAMPAIGN TREASURER

Opening Balance, this report (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero)	\$ <u>1,397.87/100</u>
Funds Transferred from Prior Campaign	\$ <u>0</u>
Deposits (Include interest)	\$ <u>0</u>
Disbursements (Include bank charges)	\$ <u>0</u>
Closing Balance, this Report	\$ <u>1,397.87/100</u>
<u>Chase</u> NAME OF BANK OR DEPOSITORY	<u>Committee To Elect Mohammed Hameeduddin</u> NAME OF ACCOUNT
<u>505 Main St Hackensack NJ 07607</u> ADDRESS OF BANK OR DEPOSITORY	
<u>Ken Hoffman</u> NAME OF TREASURER	<u>956 Phelps Rd Tennek AS 07666</u> ADDRESS OF TREASURER
	*TELEPHONE NUMBER (DAY)

CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

<u>7-1-2012</u> DATE	<u>Mohammed Hameeduddin</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
_____	_____	_____
_____	_____	_____
<u>7-1-2012</u> DATE	<u>Ken Hoffman</u> PRINT FULL NAME (TREASURER)	<u>Ken R Hoffman</u> SIGNATURE (TREASURER)

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