



**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)  
 www.elec.state.nj.us/

**FORM D-1**  
**FOR STATE USE ONLY**

**ELEC RECEIVED**  
**APR 21 2016**

**PLEASE TYPE OR PRINT**

Candidate Name Mark Schwartz

Candidate Committee Name Schwartz for Council

Address (Number and Street, City, State, Zip Code) 641 Conshohocken Ave, Teaneck NJ 07666

\*(Area) Day Telephone 917 902 9303 \*(Area) Evening Telephone 917 902 9303

County Bergen Legal Name of Election District or Municipality Teaneck

Election Date 5/11/16 Political Party, if any - Office Sought Council

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

**CHAIRPERSON**

Name Angela Angele Wilkerson

Mailing Address 85 Ayer Court

City Teaneck State NJ Zip Code 07666

\*(Area) Day Telephone 201 926-9833 \*(Area) Evening Telephone 201 926-9833

**TREASURER**

Name Karen Wigen

Mailing Address 1090 Lambert Rd

City Teaneck State NJ Zip Code 07666

\*(Area) Day Telephone 201-206-8591 \*(Area) Evening Telephone 201-206-8591

Resident Address 1090 Lambert Rd

City Teaneck State NJ Zip Code 07666

**DEPOSITORY INFORMATION**

Name of Bank or Depository J.P. Morgan Chase

Mailing Address 647 Cedar Lane

City Teaneck State NJ Zip Code 07666

(Area) Day Telephone 201-857-9425

Account Name Mark Schwartz for Teaneck Account Number 450201574

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

Name

Mailing Address

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

Mailing Address

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


Mailing Address

City	State	Zip Code
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*(Area) Day Telephone	*(Area) Evening Telephone
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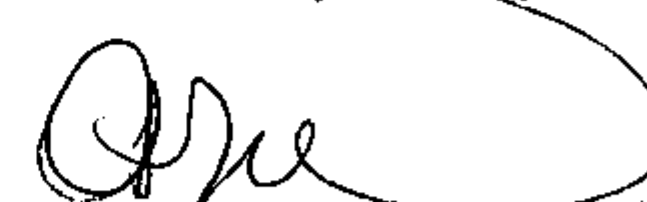
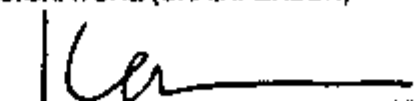
**CANDIDATE CERTIFICATION**

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.

<u>4/6/16</u> DATE	<u>Mark Schwatz</u> PRINT FULL NAME (CANDIDATE)	 SIGNATURE (CANDIDATE)
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**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.

<u>4/11/16</u> DATE	<u>Angelee Wilkerson</u> PRINT FULL NAME (CHAIRPERSON)	 SIGNATURE (CHAIRPERSON)
<u>4/11/16</u> DATE	<u>Karen Orger</u> 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# N/A.



CANDIDATE - SWORN STATEMENT

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

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FORM A-1

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APR 20 2016

PLEASE TYPE OR PRINT

Candidate Name Mark Schwartz

Candidate Committee Name Schwartz for Council

Address (Number and Street, City, State, Zip Code) 641 Conshohocken Ave Teaneck NJ 07666

\*(Area) Day Telephone 917-902-9303

\*(Area) Evening Telephone 917-902-9303

County Bergen

Legal Name of Election District or Municipality Teaneck

Election Date 5/10/16

Political Party, if any -

Office Sought Council

Election Type: (CHECK ONE)

Primary General May Municipal Run-Off Fire District Special

Amendment Yes No

I, the undersigned, do hereby certify as follows:

- 1. The total amount expended or to be expended on behalf of my candidacy by me or by any other candidate, person, or committee shall be zero, or shall not, in the aggregate, exceed \$4,500 for this election.
2. I am aware that in the event the total amount expended or to be expended on behalf of my candidacy by me or by any other candidate, person or committee shall, in the aggregate, exceed \$4,500, I am required to file a "Report of Contributions and Expenditures," Form R-1, on each subsequent reporting date.
3. I am aware that if I receive a contribution in excess of \$300 in the aggregate from one source in an election or a currency (cash) contribution in any amount, I am required to report the contribution to the Commission on "Supplemental Contributor Information," Form C-1, including the identity of the source and the aggregate total of contributions therefrom, and, if the contributor is an individual, his/her occupation and the name and address of his/her employer.
4. I am aware that if I receive a contribution in excess of \$1,400 in the aggregate from one source starting with the 13th day before the election up to, and including, the day of the election, I am required to notify the Commission in writing on the "Supplemental Contributor Information," Form C-1, within 48 hours of receipt of the contribution and to identify the source and the aggregate amount received therefrom during the period, and, if the contributor is an individual, his/her occupation and the name and address of his/her employer.
5. I am aware that if I make, incur, or authorize an expenditure of money or other thing of value in excess of \$1,400 in the aggregate to support or defeat a candidate or public question, starting with the 13th day before the election up to and including the day of the election, I am required to notify the Commission in writing within 48 hours of the expenditure on the Form E-1, "Supplemental Expenditure Information."
6. I am aware that I, as a candidate, am required to designate a campaign treasurer and a campaign depository and that I am required to file with the Commission a "Certificate of Organization and Designation of Campaign Treasurer and Depository," Form D-1, no later than 10 days after receipt of any contribution on behalf of my candidacy or 10 days after making any expenditure on behalf of my candidacy, whichever comes first.

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.

Candidate Signature [Handwritten Signature]

Date 4/4/16