



PERSONAL FINANCIAL DISCLOSURE STATEMENT

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)
Website: www.elec.nj.gov

PFD-1

ELEC Received

Apr 15 2021
02:34 PM

Amendment

Candidate Name: ELLEN J. PARK

Legislative District: 37th

Address: 116 Pershing Road

City: Engle

State: NJ

Zip: 07632

Election Date: 6/8/2021

Political Party, if any: Democrat

Office Sought:

Governor

Lieutenant Governor

Senate

Assembly

Calendar Year of Report: 2020

Note: The PFD-1 form covers the calendar year preceding the year of election.

CANDIDATE CERTIFICATION

I, Ellen J. Park the undersigned, do hereby certify as follows:

The information reported in this personal financial disclosure statement is true and complete. I am aware that if any of the statements contained herein are willfully false or incomplete, I may be subject to punishment.

4/15/2021
Date

## SCHEDULE I - EARNED INCOME

**IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES  
WITHIN A CATEGORY EXCEEDS \$1,000**

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
<b>Salary</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	HUB International LTD . 2 Bridge Plaza North Fort Lee, NJ 07027
<b>Bonus</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Royalties</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Fees</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Commissions</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Profit Sharing</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	

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<b>Salary</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	Richard J. Ma, Esq. LAW OFFICES OF MA & PARK, PLLC 20 Vesey Street, Suite 400 New York, NY 10007
<b>Bonus</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Royalties</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Fees</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Commissions</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Profit Sharing</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	

## SCHEDULE II - UNEARNED INCOME

**IDENTIFY EACH SOURCE IN EXCESS OF \$100 WHEN AGGREGATE RECEIPTS FROM ALL SOURCES  
WITHIN A CATEGORY EXCEEDS \$1,000**

Check if aggregate received in each category exceeds \$1,000	Recipient	Name and Address of Source
<b>Rents</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>Dividends</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input type="checkbox"/> Spouse <input type="checkbox"/> Child	
<b>*Other Income (Including Interest)</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	MONPIKE CORP. 2870 Broadway New York, NY 10025

\*Other Income from named investments, trusts and estates.

**SCHEDULE III - HONORARIUMS AND FEES IN EXCESS OF \$100**

Description	Recipient	Name and Address of Payer
NONE	<input checked="" type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	

**SCHEDULE IV - REIMBURSEMENTS IN EXCESS OF \$100**

Description	Recipient	Name and Address of Payer
NONE	<input checked="" type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	

## SCHEDULE V - GIFTS VALUED IN EXCESS OF \$250

Recipient	Name and Address of Donor
<input checked="" type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	<i>NONE</i>

**SCHEDULE VI**

**OWNERSHIP, HOLDING OR CONTROL OF AN INTEREST IN ANY LAND OR BUILDING IN ANY CITY IN WHICH CASINO GAMBLING IS AUTHORIZED, WHICH LAND OR BUILDING SHALL BE SPECIFIED**

Description	Person Owning, Holding, or Controlling Interest in Land/Building	Address of Land or Building
NONE	<input checked="" type="checkbox"/> Candidate <input checked="" type="checkbox"/> Spouse <input type="checkbox"/> Child	





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Englewood Cliffs

State:
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Zip:
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Democrat

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	<p><input type="checkbox"/> Candidate</p> <p><input checked="" type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	<p>Richard J. MA ESQ. Law Offices of MA and Park PLLC 20 Vesey Street, Suite 400, NY, NY 10007</p>
<p><b>Bonus</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	
<p><b>Royalties</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	
<p><b>Fees</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	
<p><b>Commissions</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	
<p><b>Profit Sharing</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	

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<p><b>Dividends</b></p> <p><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</p>	<p><input checked="" type="checkbox"/> Candidate</p> <p><input checked="" type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	
<p><b>*Other Income (Including Interest)</b></p> <p><input checked="" type="checkbox"/> Yes   <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Candidate</p> <p><input checked="" type="checkbox"/> Spouse</p> <p><input type="checkbox"/> Child</p>	<p>Monpike Corp. 2870 Broadway New York, NY 10025</p>

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Description	Recipient	Name and Address of Payer
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## SCHEDULE V - GIFTS VALUED IN EXCESS OF \$250

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