



JOINT CANDIDATES COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY

FORM D-2

ELEC Received Aug 30, 2022 3:13 AM

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

Amendment

Joint Candidates Committee Name

AET FOR TEANECK BOE

Candidate Name

EDWARD HA

Office Sought

SCHOOL BOARD

Candidate Name

SEBASTIAN RODRIGUEZ

Office Sought

SCHOOL BOARD

Candidate Name

KASSANDRA REYES

Office Sought

SCHOOL BOARD

Candidate Name

DENISE SANDERS

Office Sought

SCHOOL BOARD

Candidate Name

CLARA WILLIAMS

Office Sought

SCHOOL BOARD

Candidate Name

Office Sought

SCHOOL BOARD

Street Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666-3304

\*Day Telephone

\*Evening Telephone

Committee Email (Optional)

Committee Website (Optional)

Election Type:

School Board

Election Date

11/08/2022

County

BERGEN COUNTY

Legal Name of Election District or Municipality

TEANECK BD OF ED

Political Party

NONPARTISAN

CHAIRPERSON

Name

DUANE HARLEY

Mailing Address

114 BOGERT ST

City

TEANECK

State

NJ

Zip Code

07666

\*Day Telephone

\*Evening Telephone

TREASURER

Name

THOMAS A. ABBOTT

Mailing Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666-3304

\*Day Telephone

\*Evening Telephone

Resident Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666

\*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

**DEPOSITORY INFORMATION**

Name of Bank or Depository

LAKELAND BANK

Mailing Address

417 CEDAR LANE

City State Zip Code Day Telephone

TEANECK NJ 07666 201-836-7717

Account Name

AET FOR TEANECK BOE

Account Number

TBD

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

Name

THOMAS A. ABBOTT

Mailing Address

277 GRIGGS AVENUE

City State Zip Code \*Day Telephone \*Evening Telephone

TEANECK NJ 07666-3304

Name

KASSANDRA REYES

Mailing Address

550 GRANT TERRACE

City State Zip Code \*Day Telephone \*Evening Telephone

TEANECK NJ 07666

Name

Mailing Address

City State Zip Code \*Day Telephone \*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.

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate EDWARD HA Date 08/30/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate KASSANDRA REYES Date 08/30/2022

Registration Number \_\_\_\_\_ PIN \_\_\_\_\_ Candidate \_\_\_\_\_ Date \_\_\_\_\_

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate SEBASTIAN RODRIGUEZ Date 08/30/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate DENISE SANDERS Date 08/30/2022

Registration Number \_\_\_\_\_ PIN \_\_\_\_\_ Candidate \_\_\_\_\_ Date \_\_\_\_\_

**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.

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Chairperson DUANE M HARLEY ESQ Date 08/30/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Treasurer THOMAS A ABBOTT Date 08/30/2022

Treasurers for gubernatorial and legislative candidates are required to receive training with the NJ ELEC. If you have completed the training enter your Treasurer Training ID# \_\_\_\_\_

\*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.



JOINT CANDIDATES COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

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Website: www.elec.nj.gov

FORM D-2

ELEC Received Sep 02, 2022 7:59 PM

Amendment

Joint Candidates Committee Name

AET FOR TEANECK BOE

Candidate Name

EDWARD HA

Office Sought

SCHOOL BOARD

Candidate Name

SEBASTIAN RODRIGUEZ

Office Sought

SCHOOL BOARD

Candidate Name

KASSANDRA REYES

Office Sought

SCHOOL BOARD

Candidate Name

DENISE SANDERS

Office Sought

SCHOOL BOARD

Candidate Name

CLARA WILLIAMS

Office Sought

SCHOOL BOARD

Candidate Name

Office Sought

SCHOOL BOARD

Street Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666-3304

\*Day Telephone

\*Evening Telephone

Committee Email (Optional)

Committee Website (Optional)

Election Type:

School Board

Election Date

11/08/2022

County

BERGEN COUNTY

Legal Name of Election District or Municipality

TEANECK BD OF ED

Political Party

NONPARTISAN

CHAIRPERSON

Name

DUANE HARLEY

Mailing Address

114 BOGERT ST

City

TEANECK

State

NJ

Zip Code

07666

\*Day Telephone

\*Evening Telephone

TREASURER

Name

THOMAS A. ABBOTT

Mailing Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666-3304

\*Day Telephone

\*Evening Telephone

Resident Address

277 GRIGGS AVENUE

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TEANECK

State

NJ

Zip Code

07666-3304

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**DEPOSITORY INFORMATION**

Name of Bank or Depository

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Mailing Address

417 CEDAR LANE

City

TEANECK

State

NJ

Zip Code

07666

Day Telephone

201-836-7717

Account Name

AET FOR TEANECK BOE

Account Number

\*\*\*\*\*2469

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

Name

THOMAS A. ABBOTT

Mailing Address

277 GRIGGS AVENUE

City

TEANECK

State

NJ

Zip Code

07666-3304

\*Day Telephone

\*Evening Telephone

Name

KASSANDRA REYES

Mailing Address

550 GRANT TERRACE

City

TEANECK

State

NJ

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Mailing Address

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Zip Code

\*Day Telephone

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Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate EDWARD HA Date 09/02/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate KASSANDRA REYES Date 09/02/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate CLARA WILLIAMS Date 09/02/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate SEBASTIAN RODRIGUEZ Date 09/02/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Candidate DENISE SANDERS Date 09/02/2022

Registration Number \_\_\_\_\_ PIN \_\_\_\_\_ Candidate \_\_\_\_\_ Date \_\_\_\_\_

**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.

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Chairperson DUANE M HARLEY ESQ Date 09/02/2022

Registration Number \*\*\*\*\* PIN \*\*\*\*\* Treasurer THOMAS A ABBOTT Date 09/02/2022

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\*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.



SUPPLEMENTAL CONTRIBUTOR INFORMATION
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

FORM C-1

ELEC Received
Oct 11, 2022 2:29 PM

Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of \$300 in the aggregate from one source in the election, or any currency (cash) contributions.
Committee receiving a contribution in excess of \$1,900 in the aggregate from one source starting with the 13th day before the election up to, and including the day of the election (48-Hour Notice).

SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) Name: EDWARD HA, KASSANDRA REYES, CLARA WILLIAMS, SEBASTIAN RODRIGUEZ, DENISE SANDERS
Committee Name: AET FOR TEANECK BOE
Street Address: 277 GRIGGS AVENUE
Office Sought: SCHOOL BOARD
City: TEANECK State Zip Code: NJ 07666
\*Day Telephone: \*Evening Telephone:
Election Type: School Board Election Date: 11/08/2022
County: BERGEN COUNTY Legal Name of Election District or Municipality: TEANECK BD OF ED Political Party: NONPARTISAN

SECTION II. CONTRIBUTION INFORMATION

Date Received: 09/12/2022 Contributor Name: ED HA FOR BOARD OF EDUCATON
Address (Number and Street, City, State, Zip Code): 589 TILDEN AVE, TEANECK, NJ 07666
Aggregate Amount: Amount: \$2,000.00
Occupation (If Individual): Receipt Type: CHECK
Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual):

Date Received: 09/19/2022 Contributor Name: KASSANDRA REYES FOR BOE
Address (Number and Street, City, State, Zip Code): 550 GRANT TERRACE, TEANECK, NJ 07666
Aggregate Amount: Amount: \$800.00
Occupation (If Individual): Receipt Type: CHECK
Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual):

Date Received: 09/20/2022 Contributor Name: VICTORIA FISHER
Address (Number and Street, City, State, Zip Code): 654 POMANDER WALK, TEANECK, NJ 07666
Aggregate Amount: Amount: \$800.00
Occupation (If Individual): STAFF REPRESENTATIVE Receipt Type: LOAN
Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual): CWA, 1037 RAYMOND BOULEVARD, 5TH FLOOR, NEWARK, NJ 07102

Total This Page: \$3,600.00
Grand Total: \$5,100.00

Registration Number \*\*\*\*\* PIN \*\*\*\*\*
Candidate or Treasurer: THOMAS A ABBOTT Date: 10/11/2022

Date Received 09/21/2022 Contributor Name CLARA WILLIAMS  
Address (Number and Street, City, State, Zip Code) 21 STUYVESANT RD, TEANECK, NJ 07666 Aggregate Amount \_\_\_\_\_ Amount \$500.00  
Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_  
ACCOUNTANT Receipt Type CHECK  
Employer Name and Mailing Address (If Individual) COUNTY OF BERGEN, 1 BERGEN COUNTY PLAZA, HACKENSACK, NJ 07601

Date Received 09/21/2022 Contributor Name CLARA WILLIAMS  
Address (Number and Street, City, State, Zip Code) 21 STUYVESANT RD, TEANECK, NJ 07666 Aggregate Amount \$1,000.00 Amount \$500.00  
Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_  
ACCOUNTANT Receipt Type LOAN  
Employer Name and Mailing Address (If Individual) COUNTY OF BERGEN, 1 BERGEN COUNTY PLAZA, HACKENSACK, NJ 07601

Date Received 10/24/2022 Contributor Name ED HA FOR BOARD OF EDUCATON  
Address (Number and Street, City, State, Zip Code) 589 TILDEN AVE, TEANECK, NJ 07666 Aggregate Amount \$2,500.00 Amount \$500.00  
Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_  
Receipt Type CHECK  
Employer Name and Mailing Address (If Individual) \_\_\_\_\_

Date Received \_\_\_\_\_ Contributor Name \_\_\_\_\_  
Address (Number and Street, City, State, Zip Code) \_\_\_\_\_ Aggregate Amount \_\_\_\_\_ Amount \_\_\_\_\_  
Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_  
Receipt Type \_\_\_\_\_  
Employer Name and Mailing Address (If Individual) \_\_\_\_\_

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Receipt Type \_\_\_\_\_  
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**Total This Page:** \$1,500.00  
**Grand Total:** \$5,100.00

Date Received	Contributor Name		
Address (Number and Street, City, State, Zip Code)		Aggregate Amount	Amount
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Employer Name and Mailing Address (If Individual)	Receipt Type		

**Total This Page:** \_\_\_\_\_  
**Grand Total:** \$5,100.00

Date Received Contributor Name

Address (Number and Street, City, State, Zip Code) Aggregate Amount Amount

Occupation (If Individual) Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual) Receipt Type

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Address (Number and Street, City, State, Zip Code) Aggregate Amount Amount

Occupation (If Individual) Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual) Receipt Type

Total This Page:

Grand Total: \$5,100.00





SUPPLEMENTAL CONTRIBUTOR INFORMATION

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

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Website: www.elec.nj.gov

FORM C-1

ELEC Received
Oct 27, 2022 6:03 PM

Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of \$300 in the aggregate from one source in the election, or any currency (cash) contributions.
Committee receiving a contribution in excess of \$1,900 in the aggregate from one source starting with the 13th day before the election up to, and including the day of the election (48-Hour Notice).

SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) Name

EDWARD HA, KASSANDRA REYES, CLARA WILLIAMS, SEBASTIAN RODRIGUEZ, DENISE SANDERS

Committee Name

AET FOR TEANECK BOE

Street Address

277 GRIGGS AVENUE

Office Sought

SCHOOL BOARD

City

TEANECK

State Zip Code

NJ 07666

\*Day Telephone

\*Evening Telephone

Election Type:
(Select One)

School Board

Election Date

11/08/2022

County

BERGEN COUNTY

Legal Name of Election District or Municipality

TEANECK BD OF ED

Political Party

NONPARTISAN

SECTION II. CONTRIBUTION INFORMATION

Date Received

10/21/2022

Contributor Name

KASSANDRA REYES FOR BOE

Address (Number and Street, City, State, Zip Code)

550 GRANT TERRACE, TEANECK, NJ 07666

Aggregate Amount

\$1,600.00

Amount

\$800.00

Occupation (If Individual)

Receipt Type

CHECK

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

Date Received

10/25/2022

Contributor Name

KASSANDRA REYES FOR BOE

Address (Number and Street, City, State, Zip Code)

550 GRANT TERRACE, TEANECK, NJ 07666

Aggregate Amount

\$2,500.00

Amount

\$900.00

Occupation (If Individual)

Receipt Type

CHECK

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

Date Received

Contributor Name

Address (Number and Street, City, State, Zip Code)

Aggregate Amount

Amount

Occupation (If Individual)

Receipt Type

Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual)

Total This Page: \$1,700.00

Grand Total: \$1,700.00

Registration Number \*\*\*\*\*

PIN \*\*\*\*\*

Candidate or Treasurer THOMAS A ABBOTT

Date 10/27/2022

\*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

Date Received \_\_\_\_\_ Contributor Name \_\_\_\_\_

Address (Number and Street, City, State, Zip Code) \_\_\_\_\_ Aggregate Amount \_\_\_\_\_ Amount \_\_\_\_\_

Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_

Employer Name and Mailing Address (If Individual) \_\_\_\_\_ Receipt Type \_\_\_\_\_

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Employer Name and Mailing Address (If Individual) \_\_\_\_\_ Receipt Type \_\_\_\_\_

**Total This Page:** \_\_\_\_\_

**Grand Total:** \$1,700.00

Date Received	Contributor Name		
Address (Number and Street, City, State, Zip Code)		Aggregate Amount	Amount
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**Total This Page:** \_\_\_\_\_  
**Grand Total:** \$1,700.00

Date Received Contributor Name

Address (Number and Street, City, State, Zip Code) Aggregate Amount Amount

Occupation (If Individual) Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual) Receipt Type

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Employer Name and Mailing Address (If Individual) Receipt Type

Date Received Contributor Name

Address (Number and Street, City, State, Zip Code) Aggregate Amount Amount

Occupation (If Individual) Description, if In-Kind Contribution

Employer Name and Mailing Address (If Individual) Receipt Type

Total This Page:

Grand Total: \$1,700.00



SUPPLEMENTAL CONTRIBUTOR INFORMATION

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

FORM C-1

ELEC Received
Nov 27, 2022 10:19 AM

Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of \$300 in the aggregate from one source in the election, or any currency (cash) contributions.
Committee receiving a contribution in excess of \$1,900 in the aggregate from one source starting with the 13th day before the election up to, and including the day of the election (48-Hour Notice).

SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) Name: EDWARD HA, KASSANDRA REYES, CLARA WILLIAMS, SEBASTIAN RODRIGUEZ, DENISE SANDERS
Committee Name: AET FOR TEANECK BOE
Street Address: 277 GRIGGS AVENUE
Office Sought: SCHOOL BOARD
City: TEANECK State Zip Code: NJ 07666 \*Day Telephone: \*Evening Telephone:
Election Type: School Board Election Date: 11/08/2022
County: BERGEN COUNTY Legal Name of Election District or Municipality: TENAFly BD OF ED Political Party: NONPARTISAN

SECTION II. CONTRIBUTION INFORMATION

Date Received: 11/15/2022 Contributor Name: KASSANDRA REYES FOR BOE
Address: 550 GRANT TERRACE, TEANECK, NJ 07666 Aggregate Amount: \$2,765.00 Amount: \$265.00
Occupation: Occupation (If Individual) Receipt Type: CHECK Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual):

Date Received: 11/17/2022 Contributor Name: SEBASTIAN RODRIGUEZ
Address: 533 SAGAMORE AVE, TEANECK, NJ 07666 Aggregate Amount: \$600.00 Amount: \$350.00
Occupation: TEACHER Receipt Type: CHECK Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual): NYC DOE, 65 COURT ST, BROOKLYN, NY

Date Received: Contributor Name:
Address (Number and Street, City, State, Zip Code): Aggregate Amount: Amount:
Occupation (If Individual): Receipt Type: Description, if In-Kind Contribution:
Employer Name and Mailing Address (If Individual):

Total This Page: \$615.00
Grand Total: \$615.00

Registration Number \*\*\*\*\* PIN \*\*\*\*\*
Candidate or Treasurer: THOMAS A ABBOTT Date: 11/27/2022

Date Received \_\_\_\_\_ Contributor Name \_\_\_\_\_

Address (Number and Street, City, State, Zip Code) \_\_\_\_\_ Aggregate Amount \_\_\_\_\_ Amount \_\_\_\_\_

Occupation (If Individual) \_\_\_\_\_ Description, if In-Kind Contribution \_\_\_\_\_

Employer Name and Mailing Address (If Individual) \_\_\_\_\_ Receipt Type \_\_\_\_\_

Date Received \_\_\_\_\_ Contributor Name \_\_\_\_\_

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**Grand Total:** \$615.00

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