

FORM R-1		<b>REPORT OF CONTRIBUTIONS AND EXPENDITURES</b>		REPORT (CHECK ONE):	
<b>NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION</b> P.O. Box 185, Trenton, NJ 08625-0185 (609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532) <a href="http://www.elec.state.nj.us">www.elec.state.nj.us</a>				<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, _____	
CANDIDATE OR COMMITTEE NAME <b>Doherty for Mayor</b>				Amendment Yes <input type="checkbox"/> No <input type="checkbox"/>	
STREET ADDRESS <b>112 Inlet Terr.</b>				<b>For State Use Only</b>	
CITY <b>Belmar</b>	STATE <b>NJ</b>	ZIP CODE <b>07719</b>			
COUNTY <b>Monmouth</b>	ELECTION DISTRICT OR MUNICIPALITY <b>Belmar</b>				
POLITICAL PARTY, IF ANY <b>Democrat</b>	OFFICE SOUGHT <b>Mayor</b>				
ELECTION DATE <b>11/4/14</b>	ELECTION TYPE (CHECK ONE)		<input type="checkbox"/> PRIMARY <input type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> SCHOOL <input type="checkbox"/> SPECIAL <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> RUN-OFF <input type="checkbox"/> FIRE DISTRICT		
<b>SUMMARY TABLES</b> DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED					
<b>TABLE I. RECEIPTS</b>			THIS REPORT	CUMULATIVE TO DATE	
1. MONETARY CONTRIBUTIONS / LOANS OF \$300 OR LESS			\$ <b>2200</b>	\$ <b>2200</b>	
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]			\$ <b>0</b>	\$ <b>0</b>	
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS			\$ <b>0</b>	\$ <b>0</b>	
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]			\$ <b>0</b>	\$ <b>0</b>	
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]			\$ <b>0</b>	\$ <b>0</b>	
6. SUB TOTAL (ADD LINES 1 THRU 5)			\$ <b>2200</b>	\$ <b>2200</b>	
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)			\$ <b>0</b>	\$ <b>0</b>	
8. TOTAL CONTRIBUTIONS			\$ <b>2200</b>	\$ <b>2200</b>	
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)			\$ <b>0</b>	\$ <b>0</b>	
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)			\$ <b>2200</b>	\$ <b>2200</b>	
<b>TABLE II. EXPENDITURES</b>					
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]			\$ <b>0</b>	\$ <b>1272.67</b>	
2. DISBURSEMENTS - OTHER [Schedule 2(D)]			\$ <b>0</b>	\$ <b>0</b>	
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]			\$ <b>0</b>	\$ <b>0</b>	
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]			\$ <b>0</b>	\$ <b>0</b>	
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)			\$ <b>0</b>	\$ <b>0</b>	
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)			\$ <b>0</b>	\$ <b>0</b>	
7. SUB TOTAL (ADD LINES 1 THRU 6)			\$ <b>0</b>	\$ <b>1272.67</b>	
8. REFUNDED DISBURSEMENTS [Schedule F] (-)			\$ <b>0</b>	\$ <b>0</b>	
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)			\$ <b>0</b>	\$ <b>1272.67</b>	



# SCHEDULE A

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

CONTRIBUTOR NAME <b>Robert Quirk</b>		EMPLOYER NAME <b>NJ Turnpike</b>	
CONTRIBUTOR ADDRESS <b>108 Washington Ave.</b>		EMPLOYER ADDRESS <b>PO Box 5042</b>	
<b>Avon by the Sea</b>		<b>Wood bridge NJ</b>	
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <b>300</b>	DATE(S) RECEIVED <b>10/19/14</b>	AMOUNT(S) RECEIVED THIS PERIOD \$ <b>300</b>
OCCUPATION <b>Director</b>			
CONTRIBUTOR NAME <b>Mark Quirk</b>		EMPLOYER NAME <b>Port Authority NJ/NY</b>	
CONTRIBUTOR ADDRESS <b>1000 River Rd.</b>		EMPLOYER ADDRESS <b>1 Park Plz</b>	
<b>Belmer NJ 07019</b>		<b>Jersey City NJ 07306</b>	
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <b>300</b>	DATE(S) RECEIVED <b>10/19/14</b>	AMOUNT(S) RECEIVED THIS PERIOD \$ <b>300</b>
OCCUPATION <b>tolls Asent</b>			
CONTRIBUTOR NAME <b>Owen Mc Carthy</b>		EMPLOYER NAME <b>SELF</b>	
CONTRIBUTOR ADDRESS <b>68 Morris Ave</b>		EMPLOYER ADDRESS	
<b>Manasquan NJ 08736</b>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <b>100</b>	DATE(S) RECEIVED <b>10/17/14</b>	AMOUNT(S) RECEIVED THIS PERIOD \$ <b>100</b>
OCCUPATION <b>attorney</b>			
CONTRIBUTOR NAME <b>James Smith</b>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS <b>334 Danielle Dr.</b>		EMPLOYER ADDRESS	
<b>Ocean NJ 07712</b>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <b>50</b>	DATE(S) RECEIVED <b>10/9/14</b>	AMOUNT(S) RECEIVED THIS PERIOD \$ <b>50</b>
OCCUPATION <b>retired</b>			
CONTRIBUTOR NAME <b>John Ducey</b>		EMPLOYER NAME <b>SELF</b>	
CONTRIBUTOR ADDRESS <b>345 Herbertsville Rd.</b>		EMPLOYER ADDRESS	
<b>Briar NJ</b>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <b>50</b>	DATE(S) RECEIVED <b>10/9/14</b>	AMOUNT(S) RECEIVED THIS PERIOD \$ <b>50</b>
OCCUPATION <b>Attorney</b>			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <b>800</b>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$

# SCHEDULE A

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

CONTRIBUTOR NAME <i>William Finnegan</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>408 5<sup>th</sup> Ave</i>			EMPLOYER ADDRESS	
<i>Belmar NJ 07719</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>Patrick Magovern</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>610 6<sup>th</sup> Ave</i>			EMPLOYER ADDRESS	
<i>Belmar NJ 07719</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>Richard Carroll</i>			EMPLOYER NAME <i>Taylor Hardware</i>	
CONTRIBUTOR ADDRESS <i>1246 Maplewood Rd</i>			EMPLOYER ADDRESS <i>914 Main St.</i>	
<i>Belmar NJ</i>			<i>Belmar NJ 07719</i>	
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>Security</i>				
CONTRIBUTOR NAME <i>Michael Druz</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>1211 16<sup>th</sup> Ave</i>			EMPLOYER ADDRESS	
<i>Belmar NJ 07719</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>George Sullivan</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>503 2nd Ave</i>			EMPLOYER ADDRESS	
<i>Bradley Beach NJ</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <i>250</i>	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	



# SCHEDULE A

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

check

CONTRIBUTOR NAME Michael Alexander		EMPLOYER NAME	
CONTRIBUTOR ADDRESS 20 Maple L.		EMPLOYER ADDRESS	
Brielle NJ 08730			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 10/19/14	AMOUNT(S) RECEIVED THIS PERIOD \$ 50
OCCUPATION retired			

check

CONTRIBUTOR NAME John Paoliarulo		EMPLOYER NAME	
CONTRIBUTOR ADDRESS 539 Central Ave		EMPLOYER ADDRESS	
Carlstadt NJ 07072			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 100	DATE(S) RECEIVED 10/17/14	AMOUNT(S) RECEIVED THIS PERIOD \$ 100
OCCUPATION retired			

check

CONTRIBUTOR NAME Jeffrey Suarez		EMPLOYER NAME	
CONTRIBUTOR ADDRESS 14 Longpoint Ave		EMPLOYER ADDRESS	
Bayville NJ 08721			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 50	DATE(S) RECEIVED 10/19/14	AMOUNT(S) RECEIVED THIS PERIOD \$ 50
OCCUPATION retired			

check

CONTRIBUTOR NAME Thomas Moore		EMPLOYER NAME	
CONTRIBUTOR ADDRESS 7326 St. Rt. 19		EMPLOYER ADDRESS	
Mount Gilead OH 43338			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 150	DATE(S) RECEIVED 10/19/14	AMOUNT(S) RECEIVED THIS PERIOD \$ 150
OCCUPATION retired			

check

CONTRIBUTOR NAME Glenco Supply		EMPLOYER NAME	
CONTRIBUTOR ADDRESS PO Box 638		EMPLOYER ADDRESS	
Oakhurst NJ 07755			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 200	DATE(S) RECEIVED 10/19/14	AMOUNT(S) RECEIVED THIS PERIOD \$ 200
OCCUPATION			

(COMPLETE THIS LINE FOR EVERY PAGE USED)

TOTAL, THIS PAGE

\$ 550

(COMPLETE THIS LINE FOR LAST PAGE USED)

GRAND TOTAL

\$

# SCHEDULE A

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

CONTRIBUTOR NAME <i>Edward Hunter</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>PO Box 1452</i>			EMPLOYER ADDRESS	
<i>Jackson NJ 08525</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>Charles Gutch</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>27 Winthrop Pl.</i>			EMPLOYER ADDRESS	
<i>Hazlet NJ 07730</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50-</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>Robert Doff</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>117 Meridan Dr.</i>			EMPLOYER ADDRESS	
<i>Brick NJ</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>100</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>100-</i>	
OCCUPATION <i>retired</i>				
CONTRIBUTOR NAME <i>James Carroll</i>			EMPLOYER NAME <i>Woodbridge Township</i>	
CONTRIBUTOR ADDRESS <i>60 Fords Ave</i>			EMPLOYER ADDRESS <i>1 Main St.</i>	
<i>Fords NJ 08863</i>			<i>Woodbridge NJ 08863</i>	
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>councilman</i>				
CONTRIBUTOR NAME <i>Louis Hansen</i>			EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>19 Oak Terr.</i>			EMPLOYER ADDRESS	
<i>Neptune City 07753</i>				
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>	
OCCUPATION <i>retired</i>				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <i>300</i>	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$	



# SCHEDULE A

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

CONTRIBUTOR NAME <i>Masterpiece Construction</i>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>127 Morris Ave</i>		EMPLOYER ADDRESS	
<i>Manasquan NJ 08736</i>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/17/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50-</i>
OCCUPATION			
CONTRIBUTOR NAME <i>Sean Doray</i>		EMPLOYER NAME <i>Self</i>	
CONTRIBUTOR ADDRESS <i>107 Spinnacher Way</i>		EMPLOYER ADDRESS	
<i>Neptune NJ</i>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>100</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>100</i>
OCCUPATION <i>political consultant</i>			
CONTRIBUTOR NAME <i>Joseph Balbo</i>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>8 High Point Rd.</i>		EMPLOYER ADDRESS	
<i>Lincroft NJ 07738</i>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>
OCCUPATION <i>retired</i>			
CONTRIBUTOR NAME <i>Robert Sugore</i>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>283 18th Ave.</i>		EMPLOYER ADDRESS	
<i>Bridgman NJ 08724</i>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>
OCCUPATION <i>retired</i>			
CONTRIBUTOR NAME <i>William Ryan</i>		EMPLOYER NAME	
CONTRIBUTOR ADDRESS <i>1000 Mar Rd.</i>		EMPLOYER ADDRESS	
<i>Belmar NJ 07719</i>			
CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ <i>50</i>	DATE(S) RECEIVED <i>10/19/14</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>50</i>
OCCUPATION <i>Best efforts</i>			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ <i>350</i>
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ <i>2200</i>

**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 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	\$



**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
				\$	\$	\$
<div>(COMPLETE THIS LINE FOR EVERY PAGE USED)</div> <div>TOTAL, THIS PAGE</div> <div>\$</div>						
<div>(COMPLETE THIS LINE FOR LAST PAGE USED)</div> <div>GRAND TOTAL</div> <div>\$</div>						

## Other

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)				\$
<p>COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:</p> <p>SCHEDULE 3(D) GRAND TOTAL</p> <p>ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)</p> <p>GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES</p>				<p>1. \$</p> <p>2. \$</p> <p>3. \$</p>

## SCHEDULE E

### Outstanding Obligations

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

**SCHEDULE F**  
**Refunded Disbursements**

Date(s)	Check #	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 \$
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.)

\$ 227.33

**Funds Transferred from Prior Campaign**

\$ 0

**Deposits** (Include interest)

\$ 2200.00

**Disbursements** (Include bank charges)

\$ 0

**Closing Balance, this Report**

\$ 2427.33

Investors Bank  
NAME OF BANK OR DEPOSITORYDoherty for Mayor  
NAME OF ACCOUNT2426 Highway 34 Manasquan NJ 08736  
ADDRESS OF BANK OR DEPOSITORYMaureen Doherty  
NAME OF TREASURER9084900912  
\*TELEPHONE NUMBER (DAY)146 North Ave Fanwood NJ 07076  
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.

10/23/14  
DATEMatthew Doherty  
PRINT FULL NAME (CANDIDATE)[Signature]  
SIGNATURE (CANDIDATE)\_\_\_\_\_  
DATE\_\_\_\_\_  
PRINT FULL NAME (CANDIDATE)\_\_\_\_\_  
SIGNATURE (CANDIDATE)\_\_\_\_\_  
DATE\_\_\_\_\_  
PRINT FULL NAME (CANDIDATE)\_\_\_\_\_  
SIGNATURE (CANDIDATE)10/23/14  
DATEMaureen Doherty  
PRINT FULL NAME (TREASURER)Maureen Doherty  
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)