

REPORT OF CONTRIBUTIONS AND FORM R-1 REPORT FILED: **EXPENDITURES** 20-DAY POSTELECTION **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 For State Use Only JENNIFER A NICOLAY STREET ADDRESS 316 FOURTH AVENUE ZIP CODE STATE CITY 07719 NJ **BELMAR** COUNTY **ELECTION DISTRICT OR MUNICIPALITY** BELMAR MONMOUTH OFFICE SOUGHT POLITICAL PARTY, IF ANY DEMOCRAT COUNCIL **ELECTION DATE ELECTION TYPE GENERAL ELECTION** November 06, 2012 **SUMMARY TABLES** THIS REPORT CUMULATIVE TABLE I. RECEIPTS TO DATE 1. MONETARY CONTRIBUTIONS OF \$300 OR LESS \$ 0.00 \$ 4,708.00 2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL \$ \$ 250.00 8,150.00 CURRENCY CONTRIBUTIONS [Schedule A] \$ 100.00 100.00 3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS \$ \$ 0.00 \$ 85.02 4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B] 5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS \$ 0.00 \$ 0.00 [Schedule C] \$ 13.043.02 \$ 350.00 (ADD LINES 1 THRU 5) 6. SUB TOTAL \$ 0.00 \$ 0.00 7. REFUND OF EXCESSIVE CONTRIBUTIONS (-)\$ 350.00 \$ 13,043.02 8. TOTAL CONTRIBUTIONS \$ 0.00 300.00 9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN \$ \$ 350.00 13,343,02 10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9) TABLE II. EXPENDITURES 1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)] \$ 7,806.45 \$ 12,778.96 0.00 \$ 0.00 \$ 2. DISBURSEMENTS - OTHER [Schedule 2(D)] 3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER \$ 0.00 \$ 150.00 CANDIDATES/COMMITTEES [Schedule 3(D)] \$ 4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS \$ 0.00 0.00 [Pro Rata Amount Schedules 1(D) and 2(D)] \$ 100.00 \$ 100.00 5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3) \$ 0.00 \$ 85.02 6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4) (ADD LINES 1 THRU 6) \$ 7,906.45 \$ 13,113.98 7. SUB TOTAL \$ 0.00 0.00\$ 8. REFUNDED DISBURSEMENTS [Schedule F] (-)7,906.45 \$ 9. TOTAL EXPENDITURES \$ 13,113.98 (LINE 7 MINUS LINE 8)

SCHEDULE A

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

CONTRIBUTOR NAME IANE MACGOVERN		EMPLOYER NAME ST ROSE SCHOOL	
CONTRIBUTOR ADDRESS 207 S LAKE DR		EMPLOYER ADDRESS 605 6TH AVE	
BELMAR NJ 07719		BELMAR NJ 07719	
. •	AGGREGATE AMOUNT \$500.00	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD
OCCUPATION TEACHER		10/26/2012	\$ 250.00
COMMENTS			

SCHEDULE B

In-Kind Contributions in Excess of \$300

CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION			

GRAND TOTAL

ADJUSTMENT SCHEDULE

Refund of Excessive Contributions

PAYMENT	CHECK	PAYEE NAME AND ADDRESS	REFUNDED
DATE	NO.		AMOUNT

GRAND TOTAL	
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SCHEDULE E

Outstanding Obligations

Date Incurred	Creditor's Name	Address	Description	Amount

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	TOTAL OUTSTANDING OBLIGATIONS	
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SCHEDULE F

Refunded Disbursements

Date	Full Name	Address	Description	Amount

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	SCHEDULE F TOTAL	

Candidate/Committee Name: JENNIFER A NICOLAY 913070201G2012

SCHEDULE G

Recipients of In-Kind Contributions

NAME OF RECIPIENT CANDIDATE	E/COMMITTEE		
MAILING ADDRESS			
OFFICE SOUGHT	ELECTION DISTRICT OR MUNICIP	ALITY	- 1
CHECK NUMBER	PAYMENT DATE	AMOUNT	

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.)	\$7,885.98
Funds Transferred from Prior Campaign	\$0.00
DEPOSITS (Include interest)	\$250.00
DISBURSEMENTS (Include bank charges)	\$7,806.45
CLOSING BALANCE, this Report	\$329.53
INVESTORS BANK	NICOLAY FOR COUNCIL
NAME OF BANK OR DEPOSITORY	NAME OF ACCOUNT
910 STATE ROUTE 71 SPRING LAKE NJ 07762	
ADDRESS OF BANK OR DEPOSITORY	
MAUREEN DOHERTY	908-490-0192
NAME OF TREASURER	* TELEPHONE NO (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.

11 23 /12 Date

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JENNIFER A NICOLAY

PRINT FULL NAME (CANDIDATE)

11 23 12 Date

MAUREEN DOHERTY

PRINT FULL NAME (TREASURER)

SIGNATURE (CANDIDATIO

Mar Lilling and

SIGNATURE (TREASURER)

MAUREEN DOHERTY - I have received the required Treasurer Training.

Treasurer Training ID#: C1039

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Cumulative Contribution Listing

Page 1 of 1

913070201G2012 JENNIFER A NICOLAY

by Name

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*** Employer Data Printed Below Contributor Information ***

	20Day		20Day	Period
	<u> </u>		1	<u>Item</u>
	MACGOVERN, JANE ST ROSE SCHOOL		BELMAR CHAMBER OF COMMERCE	Contributor Name
	207 S LAKE DR 605 6TH AVE		1005 1/2 MAIN ST	Address
	BELMAR NJ 07719 BELMAR NJ 07719		BELMAR NJ 07719	City, State Zip
Total for Contributor	A 10/26/2012 \$ 3200	Total for Contributor	B 10/27/2012	<u>CT</u> <u>Date</u>
S 2		9	↔	Amount
250.00	250.00	100.00	100.00	E

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