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**SINGLE CANDIDATE COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY**

**FORM D-1**

FOR STATE USE ONLY

**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/>

**PLEASE TYPE OR PRINT**

Candidate Name **JENNIFER NICOLAY**

Candidate Committee Name **NICOLAY FOR COUNCIL**

Address (Number and Street, City, State, Zip Code) **310 4<sup>th</sup> Avenue, Belmar, NJ 07719**

\*(Area) Day Telephone **732 682 9243** \*(Area) Evening Telephone **732 280 5003**

County **Monmouth** Legal Name of Election District or Municipality **Belmar NJ**

Election Date **June 5, 2012** Political Party, if any **Democratic** Office Sought **COUNCIL**

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

**CHAIRPERSON**  
Name

Mailing Address

City State Zip Code

\*(Area) Day Telephone \*(Area) Evening Telephone

**TREASURER**  
Name **Maureen Boherty**

Mailing Address **321 Cook Avenue**

City **Scotch Plains** State **NJ** Zip Code **07076**

\*(Area) Day Telephone **908-490-0192** \*(Area) Evening Telephone **908-490-0192**

Resident Address **321 Cook Avenue**

City **Scotch Plains** State **NJ** Zip Code **07076**

**DEPOSITORY INFORMATION**  
Name of Bank or Depository **Investors Bank**

Mailing Address **910 State Route 71**

City **Spring Lake** State **NJ** Zip Code **07762**

(Area) Day Telephone **732-449-2772**

Account Name **Nicolay FOR Council** Account Number **008 899 01976**

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

5/30/12                      Jennifer Nicolay                      Jennifer Nicolay  
DATE                              PRINT FULL NAME (CANDIDATE)                      SIGNATURE (CANDIDATE)

**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.

5/30/12                      Maureen Doherty                      Maureen Doherty  
DATE                              PRINT FULL NAME (CHAIRPERSON)                      SIGNATURE (CHAIRPERSON)

5/30/12                      Maureen Doherty                      Maureen Doherty  
DATE                              PRINT FULL NAME (TREASURER)                      SIGNATURE (TREASURER)

Treasurers for Governatorial 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# CO139