



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)
www.elec.state.nj.us/

PLEASE TYPE OR PRINT

Candidate Name: *Joseph Valvario*

Candidate Committee Name: *Valvario for Belmar Council*

Address (Number and Street, City, State, Zip Code): *P.O. Box 595, Belmar, N.J. 07719*

*(Area) Day Telephone: *732-681-6791* *(Area) Evening Telephone: *732-681-6791*

County: *Monmouth* Legal Name of Election District or Municipality: *Borough of Belmar*

Election Date: *Nov. 7, 2017* Political Party, if any: *REPUBLICAN* Office Sought: *Council*

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

CHAIRPERSON

Name:

Mailing Address:

City: State: Zip Code:

*(Area) Day Telephone: *(Area) Evening Telephone:

TREASURER

Name: *John Yannuzzi*

Mailing Address: *229 16th Avenue*

City: *Belmar* State: *New Jersey* Zip Code: *07719*

*(Area) Day Telephone: *732-681-6791* *(Area) Evening Telephone: *732-681-6791*

Resident Address: *229 16th Avenue*

City: *Belmar* State: *New Jersey* Zip Code: *07719*

DEPOSITORY INFORMATION

Name of Bank or Depository: *PNC BANK*

Mailing Address: *320 MAIN STREET*

City: *Avon-by-the-Sea* State: *New Jersey* Zip Code: *07717*

(Area) Day Telephone: *732-502-8013*

Account Name: *Valvario for Belmar Council* Account Number: *8041253778*

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

Name <i>JOHN YANUZZI</i>		
Mailing Address <i>729 16TH AVENUE</i>		
City <i>REDMAR</i>	State <i>NEW JERSEY</i>	Zip Code <i>07719</i>
*(Area) Day Telephone <i>732-681-6791</i>	*(Area) Evening Telephone <i>732-681-6791</i>	

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.

8/23/17 *Josue Valerio* *[Signature]*
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.

8/23/17 *John Yanzuzi* *[Signature]*
DATE PRINT FULL NAME (CHAIRPERSON) SIGNATURE (CHAIRPERSON)
8/23/17 *John Yanzuzi* *[Signature]*
DATE PRINT FULL NAME (TREASURER) 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# _____.