

<b>FORM R-1</b>	<b>REPORT OF CONTRIBUTIONS AND EXPENDITURES</b>	<b>REPORT (CHECK ONE):</b> <input type="checkbox"/> 29 - DAY PRE-ELECTION <input checked="" type="checkbox"/> 31 - 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, _____
<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) www.efec.state.nj.us		
CANDIDATE OR COMMITTEE NAME <i>Nicolay for Council</i>		<b>For State Use Only</b>
STREET ADDRESS <i>316 Yrr Ave</i>		
CITY <i>Belmer</i>	STATE <i>NJ</i>	ZIP CODE <i>07719</i>
COUNTY <i>Monmouth</i>	ELECTION DISTRICT OR MUNICIPALITY <i>Belmer</i>	
POLITICAL PARTY, IF ANY <i>Democrat</i>	OFFICE SOUGHT <i>Council</i>	
ELECTION DATE <i>11/2/15</i>	ELECTION TYPE (CHECK ONE)	<input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> MAY MUNICIPAL RUN-OFF <input type="checkbox"/> SCHOOL DISTRICT <input type="checkbox"/> SPECIAL
<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	\$ <i>450.00</i>	\$ <i>3297.50</i>
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ <i>500</i>	\$ <i>4000.00</i>
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ <i>0</i>	\$ <i>0</i>
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ <i>0</i>	\$ <i>0</i>
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ <i>0</i>	\$ <i>0</i>
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ <i>950.00</i>	\$ <i>7297.50</i>
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule]	(-) \$ <i>0</i>	\$ <i>500</i>
8. TOTAL CONTRIBUTIONS	\$ <i>950.00</i>	\$ <i>10797.50</i>
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN	(+)	\$ <i>0</i>
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ <i>950.00</i>	\$ <i>6797.50</i>
<b>TABLE II. EXPENDITURES</b>		
	THIS REPORT	CUMULATIVE TO DATE
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ <i>1001.39</i>	\$ <i>1753.38</i>
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ <i>0</i>	\$ <i>0</i>
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ <i>0</i>	\$ <i>0</i>
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ <i>0</i>	\$ <i>0</i>
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ <i>0</i>	\$ <i>0</i>
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ <i>0</i>	\$ <i>0</i>
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ <i>1001.39</i>	\$ <i>1753.38</i>
8. REFUNDED DISBURSEMENTS [Schedule F]	(-) \$ <i>0</i>	\$ <i>0</i>
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ <i>1001.39</i>	\$ <i>1753.38</i>

**SCHEDULE A**

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

CONTRIBUTOR NAME <i>Lynn Lemire Bryan</i>			EMPLOYER NAME <i>NJ Natural Gas</i>	
CONTRIBUTOR ADDRESS <i>2015 Diana Rd</i>			EMPLOYER ADDRESS <i>1415 Wycoff Rd</i>	
<i>Wall Township NJ 07719</i>			<i>Wall NJ 07719</i>	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$ <i>500</i>	DATE(S) RECEIVED <i>10/4/15</i>	AMOUNT(S) RECEIVED THIS PERIOD \$ <i>500</i>
OCCUPATION <i>Communication</i>				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
CONTRIBUTOR NAME			EMPLOYER NAME	
CONTRIBUTOR ADDRESS			EMPLOYER ADDRESS	
<input type="checkbox"/>	CHECK IF CURRENCY	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
<b>(COMPLETE THIS LINE FOR EVERY PAGE USED)</b>			<b>TOTAL, THIS PAGE</b>	\$ <i>500</i>
<b>(COMPLETE THIS LINE FOR LAST PAGE USED)</b>			<b>GRAND TOTAL</b>	\$ <i>500</i>

**SCHEDULE B**  
**In-Kind Contributions in Excess of \$300**

CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
CONTRIBUTOR NAME		EMPLOYER NAME	
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS	
	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION			
DESCRIPTION OF IN-KIND CONTRIBUTION(S)			
<b>(COMPLETE THIS LINE FOR EVERY PAGE USED)</b>		<b>TOTAL, THIS PAGE</b>	<b>\$</b>
<b>(COMPLETE THIS LINE FOR LAST PAGE USED)</b>		<b>GRAND TOTAL</b>	<b>\$</b>

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

**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
10/21/15	103	Postmaster Belmer NJ	Postage for Mailbox	\$ 778.31	\$ 778.31	\$ 0
10/19/15	104	Kintech 2400 Belmer Blvd Belmer NJ 07919	Printing expense	223.08	223.08	
<b>(COMPLETE THIS LINE FOR EVERY PAGE USED)</b>				<b>TOTAL, THIS PAGE</b>	\$ 1,001.39	\$
<b>(COMPLETE THIS LINE FOR LAST PAGE USED)</b>				<b>GRAND TOTAL</b>	\$ 1,001.39	\$



**SCHEDULE 3(D) - DISBURSEMENTS**  
**Contributions made to other Candidates/Committees**

PAYMENT DATE	CHECK NO.	RECIPIENT CANDIDATE/COMMITTEE	ADDRESS	AMOUNT
<del> </del>				
(COMPLETE THIS LINE FOR EVERY PAGE USED)				
TOTAL, THIS PAGE				
\$				
COMPLETE THE FOLLOWING LINES FOR LAST PAGE USED:				
SCHEDULE 3(D) GRAND TOTAL				
ADD THE "PRO - RATA AMOUNT OTHERS" COLUMN FROM SCHEDULES 1(D) AND 2(D)				
(+)				
GRAND TOTAL OF CONTRIBUTIONS MADE TO AND ON BEHALF OF CANDIDATES/COMMITTEES				
1. \$				
2. \$				
3. \$				



**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 \$
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

<b>Opening Balance, this report</b> (Insert closing balance of last report, or, if this is the first report filed by this entity for this election, insert zero.)	\$ <u>5095.51</u>
<b>Funds Transferred from Prior Campaign</b>	\$ <u>0</u>
<b>Deposits</b> (Include interest)	\$ <u>950.00</u>
<b>Disbursements</b> (Include bank charges)	\$ <u>1001.39</u>
<b>Closing Balance, this Report</b>	\$ <u>5044.12</u>
<u>Investors Savings</u> NAME OF BANK OR DEPOSITORY	<u>Nicolay for Council</u> NAME OF ACCOUNT
<u>1001 Highway 71</u> ADDRESS OF BANK OR DEPOSITORY	<u>Spring Lake Heights NJ 07702</u>
<u>Maureen Roberts</u> NAME OF TREASURER	<u>146 North Ave Fairwood NJ 07023</u> TELEPHONE NUMBER (DAY)
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.

<u>10/22/15</u> DATE	<u>Jennifer Nicolay</u> PRINT FULL NAME (CANDIDATE)	<u>Jennifer Nicolay</u> SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
_____ DATE	_____ PRINT FULL NAME (CANDIDATE)	_____ SIGNATURE (CANDIDATE)
<u>10/22/15</u> DATE	<u>Maureen Roberts</u> PRINT FULL NAME (TREASURER)	<u>Maureen Roberts</u> 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.

<u>          </u> DATE	<u>          </u> PRINT FULL NAME (CANDIDATE)	<u>          </u> SIGNATURE (CANDIDATE)
<u>          </u> DATE	<u>          </u> PRINT FULL NAME (CANDIDATE)	<u>          </u> SIGNATURE (CANDIDATE)
<u>          </u> DATE	<u>          </u> PRINT FULL NAME (CANDIDATE)	<u>          </u> SIGNATURE (CANDIDATE)
<u>          </u> DATE	<u>          </u> PRINT FULL NAME (TREASURER)	<u>          </u> SIGNATURE (TREASURER)













Last Name	First Name	Salu tati on	Address	City	Stat e	Zip	Date Received	Amount	Employer	Employer Address	City	Stat e	Zip	Occupation
Election Fund of DeBartolo and Brennan	Paul	Mr	112 Inlet Terrace	Belmar	NJ	07719	8/17/2015	\$162.80	Retired					Retired
Carew Controlly	Colleen	Ms	506 Main Street	Belmar	NJ	07719	9/14/2015	\$100.00	Retired					Retired
Rala	Frank	Mr	450 7th Street Apt 3K	Avon By The Sea	NJ	07717	9/10/2015	\$500.00	Borough of Belmar	601 Main Street	Belmar	NJ	07719	Business Administrator
Marcos	Laura	Ms	515 7th Avenue	Hoboken	NJ	07030	9/14/2015	\$1,000.00	Self-Employed Contractor	450 7th Street Apt 3K	Hoboken	NJ	07030	Self-Employed Contractor
Gesell	Darlene	Mr	4 Green Meadows Road	Belmar	NJ	07719	9/18/2015	\$100.00	M Public Affairs, Inc.	608-612 Cookman Ave, Unit 5	Asbury Park	NJ	07712	Principal
Doman-Ramey	Ellen	Ms	710 8th Avenue	Fairfield	NJ	07004	9/18/2015	\$50.00	Fairfield Public Library	251 Hollywood Ave	Fairfield	NJ	07004	President Board of Trustees
Spennath	Paul	Mr	300 8th Avenue	Belmar	NJ	07719	9/20/2015	\$50.00	Retired					Retired
Fairview Insurance Agency	William	Mr	25 Fairview Avenue	Verona	NJ	07044	9/21/2015	\$300.00	Retired					Retired
McKlim	William	Mr	905 Ocean Avenue	Belmar	NJ	07719	9/23/2015	\$60.00	McKlim Photography	905 Ocean Avenue	Belmar	NJ	07719	Photographer
Young	Dolores	Mrs	1702 A Street	Belmar	NJ	07719	9/23/2015	\$200.00	Retired					Retired
Windas	Edward	Mrs	416 7th Avenue	Belmar	NJ	07719	9/23/2015	\$100.00	Middlesex County	101 Interchange Plaza	Cranbury	NJ	08512	Solid Waste Management
Druz	Michael	Mr	400 Ocean Avenue, Unit 2	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
Murray	Walter	Mr	314 4th Avenue	Belmar	NJ	07719	9/23/2015	\$50.00	Retired					Retired
Murray	Carol	Mrs	314 4th Avenue	Belmar	NJ	07719	9/23/2015	\$50.00	Retired					Retired
Keown-Blackburn	Janis	Ms	106 River Court	Belmar	NJ	07719	9/23/2015	\$50.00	Retired					Retired
Blanchard	Wayne	Mr	1330 Route 71, Unit 11B	Belmar	NJ	07719	9/23/2015	\$50.00	State Troopers Fraternal	2634 Highway 70	Manasquan	NJ	08736	Vice President for Legislation and Grievances.
Furay	Mary Ann	Mr	601 8th Avenue	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
McGovern	Brian	Mr	207 South Lake Drive	Belmar	NJ	07719	9/23/2015	\$500.00	St Peter School	415 Atlantic Avenue	Point Pleasant	NJ	08742	Teacher
Doherty	Matthew	Mr	112 Inlet Terrace	Belmar	NJ	07719	9/23/2015	\$1,000.00	George McKelvey Co, Inc	529 Washington Blvd	Sea Girt	NJ	08750	Financial Advisor
Casserty	Kathleen	Ms	816 13th Avenue	Belmar	NJ	07719	9/23/2015	\$100.00	Matawan Aberdeen School	One Crest Way	Aberdeen	NJ	07747	Teacher
Day	Sharon	Mrs	1408 L Street	Belmar	NJ	07719	9/23/2015	\$100.00	Belmar Public Library	517 10th Avenue	Belmar	NJ	07719	Librarian
Cory	Edwin	Mr	1201 L Street	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
Hitchinson	John	Mr	519 8th Avenue	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
Grosshandler	Janet	Ms	PO Box 787	Belmar	NJ	07719	9/23/2015	\$150.00	Retired					Retired
Murray	Eugene	Mr	710 8th Avenue, Apt 4A	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
Cirelli	Frank	Mr	1902 Ocean Avenue	Belmar	NJ	07719	9/23/2015	\$200.00	Borough of Belmar	601 Main Street	Belmar	NJ	07719	Code Enforcer
Ryan	Marlene	Mrs	1706 E Street	Belmar	NJ	07719	9/23/2015	\$50.00	Retired					Retired
Van Scholck	Catherine	Mrs	303 8th Avenue	Belmar	NJ	07719	9/23/2015	\$50.00	Belmar Board of Education	1101 Main Street	Belmar	NJ	07719	Teacher
Lelia	Peterson	Mr	224 15th Avenue	Wall	NJ	07719	9/23/2015	\$50.00	Baltimore Orioles	333 W Camden Street	Baltimore	MD	21201	Coach
Wortham	Erica	Mrs	35 Rasquet Road	Wall	NJ	07719	9/23/2015	\$50.00	Stay at home mom					Stay at home mom
Balasterri	Deborah	Mrs	200 18th Avenue	Belmar	NJ	07719	9/23/2015	\$50.00	Retired					Retired
Volker	Tom	Mr	527 8th Avenue	Belmar	NJ	07719	9/23/2015	\$100.00	Retired					Retired
Klabin	Aloysius	Mr	14 Jason Drive	Spring Lake	NJ	07762	9/23/2015	\$500.00	Klabin's Restaurant	708 River Road	Belmar	NJ	07719	Owner
William	Wendley	Mrs	512 Bethel Church Road	North East	MD	21901	9/26/2015	\$50.00	Retired					Retired
Fahy	Allen	Mrs	400 River Avenue	Belmar	NJ	07719	9/26/2015	\$25.00	Gloria Wilson & Co	2007 Highway 35	Wall	NJ	07719	Sales Associate
Poff	Robert	Mr	117 Meridian Drive	Brick	NJ	08724	10/4/2015	\$100.00	Borough of Belmar	601 Main Street	Belmar	NJ	07719	Code Enforcer
Marth	Alexandra	Ms	106 10th Avenue	Belmar	NJ	07719	10/3/2015	\$100.00	self-employed					Artist

