

FORM R-1	REPORT OF CONTRIBUTIONS AND EXPENDITURES	REPORT (CHECK ONE): <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, _____
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		
CANDIDATE OR COMMITTEE NAME RICHIE BELMAR FIRST- MAGOVERN, DYCOLAY		
STREET ADDRESS 207 SOUTH LAKE DRIVE		
CITY BELMAR	STATE NJ	ZIP CODE 07719
COUNTY MONMOUTH	ELECTION DISTRICT OR MUNICIPALITY BELMAR	
POLITICAL PARTY, IF ANY DEMOCRAT	OFFICE SOUGHT MAYOR + COUNCIL	
ELECTION DATE 11/6/18	ELECTION TYPE (CHECK ONE) <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> GENERAL	<input type="checkbox"/> MAY MUNICIPAL <input type="checkbox"/> RUN-OFF <input type="checkbox"/> SCHOOL <input type="checkbox"/> FIRE DISTRICT <input type="checkbox"/> SPECIAL
SUMMARY TABLES DO NOT ATTEMPT TO COMPLETE TABLES I AND II UNTIL APPROPRIATE SCHEDULES HAVE BEEN COMPLETED		
TABLE I. RECEIPTS		
1. MONETARY CONTRIBUTIONS / LOANS OF \$300 OR LESS	\$ 575	\$ 4435
2. MONETARY CONTRIBUTIONS IN EXCESS OF \$300 AND ALL CURRENCY CONTRIBUTIONS [Schedule A]	\$ 500	\$ 3006
3. IN-KIND CONTRIBUTIONS OF \$300 OR LESS	\$ 0	\$ 0
4. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 [Schedule B]	\$ 0	\$ 0
5. LOANS RECEIVED IN EXCESS OF \$300 AND ALL CURRENCY LOANS [Schedule C]	\$ 0	\$ 0
6. SUB TOTAL (ADD LINES 1 THRU 5)	\$ 1075	\$ 7435
7. REFUND OF CONTRIBUTIONS [Adjustment Schedule] (-)	\$ 0	\$ 0
8. TOTAL CONTRIBUTIONS	\$ 1075	\$ 7435
9. ADD FUNDS TRANSFERRED FROM PRIOR CAMPAIGN (+)	\$ 0	\$ 0
10. TOTAL RECEIPTS (ADD LINE 8 + LINE 9)	\$ 1075	\$ 7435
TABLE II. EXPENDITURES		
1. DISBURSEMENTS - CAMPAIGN EXPENSES [Schedule 1(D)]	\$ 3543.71	\$ 8285.81
2. DISBURSEMENTS - OTHER [Schedule 2(D)]	\$ 0	\$ 0
3. DISBURSEMENTS - CONTRIBUTIONS MADE TO OTHER CANDIDATES/COMMITTEES [Schedule 3(D)]	\$ 0	\$ 0
4. CONTRIBUTIONS MADE ON BEHALF OF OTHERS [Pro Rata Amount Schedules 1(D) and 2(D)]	\$ 0	\$ 0
5. IN-KIND CONTRIBUTIONS OF \$300 OR LESS (TABLE I, LINE 3)	\$ 0	\$ 0
6. IN-KIND CONTRIBUTIONS IN EXCESS OF \$300 (TABLE I, LINE 4)	\$ 0	\$ 0
7. SUB TOTAL (ADD LINES 1 THRU 6)	\$ 3543.71	\$ 8285.81
8. REFUNDED DISBURSEMENTS [Schedule F] (-)	\$ 0	\$ 0
9. TOTAL EXPENDITURES (LINE 7 MINUS LINE 8)	\$ 3543.71	\$ 8285.81


ALL DONATIONS AMOUNTS MUST BE REPORTED IN BELMAR

SCHEDULE A

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

CONTRIBUTOR NAME JENNIFER NICOLAY		EMPLOYER NAME AMERICAS COMMVAULT		
CONTRIBUTOR ADDRESS 316 4 th AVE		EMPLOYER ADDRESS 1 COMMVAULT WAY		
BELMAR, NJ 07719		JIMMOW FALLS, NJ 07734		
<input type="checkbox"/>	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500	DATE(S) RECEIVED 10/18/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 500
OCCUPATION AMERICAS CUSTOMER REP MANAGER				
CONTRIBUTOR NAME MARK LEVINS		EMPLOYER NAME WILHELMSED SHIPS SERVICE LLC		
CONTRIBUTOR ADDRESS 904 13 th AVE		EMPLOYER ADDRESS 9400 NEW CENTURY DR		
BELMAR NJ 07719		PASADENA, TX 77507		
<input type="checkbox"/>	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 500	DATE(S) RECEIVED 10/18/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 250
OCCUPATION ACCOUNT MANAGER				
CONTRIBUTOR NAME JANET GROSSHANDLER		EMPLOYER NAME		
CONTRIBUTOR ADDRESS PO BOX 787, 701 OCEAN AVE APT 1		EMPLOYER ADDRESS		
BELMAR, NJ 07719				
<input type="checkbox"/>	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 300	DATE(S) RECEIVED 10/18/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 300
OCCUPATION RETIRED				
CONTRIBUTOR NAME ELLEN DOHAN-RANEY		EMPLOYER NAME		
CONTRIBUTOR ADDRESS 710 8 th AVE		EMPLOYER ADDRESS		
BELMAR				
<input type="checkbox"/>	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$ 25	DATE(S) RECEIVED 10/18/18	AMOUNT(S) RECEIVED THIS PERIOD \$ 25
OCCUPATION RETIRED				
CONTRIBUTOR NAME		EMPLOYER NAME		
CONTRIBUTOR ADDRESS		EMPLOYER ADDRESS		
<input type="checkbox"/>	CHECK IF CURRENCY <input type="checkbox"/>	AGGREGATE AMOUNT \$	DATE(S) RECEIVED	AMOUNT(S) RECEIVED THIS PERIOD \$
OCCUPATION				
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$ 1075	
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 1075	

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)			
(COMPLETE THIS LINE FOR EVERY PAGE USED)		TOTAL, THIS PAGE	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)		GRAND TOTAL	\$ 

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 \$

1/2

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
10/01/18	1005	POSTMASTER-RED BANK 171 BROAD ST UNIT 1 RED BANK, NJ 07701	MAILER POSTAGE	\$ 555.30	\$ 555.30	\$
10/12/18	ETF	VANTU GOV HILL RD 8500 SYM MES, OH 37427	ACTORVE FEES	et. 91	11-91	
10/14/18	ETF	COAST STAR 13 BROAD ST MAPASQUAH, NJ 08736	AD	306.40	306.40	
10/16/18	0006	ACW GRAPHICS PO BOX 1528 WALL, NJ 07719	CAMPAIGN MAILER	1076.07	1076.07	
10/17/18	ETF	TAP INTO, LLC PO BOX 224 NEW PROVIDENCE, NJ 07974	ADVERTISING	400.-	400.-	
10/18/18	ETF	FACEBOOK HACKER WAY HEMLO PARK, CA 94026	FACEBOOK ADS	375 -	375	
(COMPLETE THIS LINE FOR EVERY PAGE USED)				TOTAL, THIS PAGE	\$ 2724.68	\$
(COMPLETE THIS LINE FOR LAST PAGE USED)				GRAND TOTAL	\$	\$

2


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
10/18/18	1007	POSTAGE - RED BANK 171 BROAD ST UNIT 1 RED BANK, NJ 07701	POSTAGE	465.87	465.87	\$
10/19/18	ETP	COAST STAR 13 BROAD ST MANASSQUAN NJ 08736	AD	306.40	306.40	
10/20/18	ETP	DOUGH BOYS PIZZERIA RESTAURANT 502 MAIN ST RED BANK, NJ 07719	Lunch meeting w/ supporters	58.76 46.76	58.76 46.76	
10/23/18	1001	POSTMASTER-RED BANK 171 BROAD ST UNIT 1 RED BANK, NJ 07701	MAIL-ER POSTAGE	465.87	465.87	
TOTAL, THIS PAGE				\$ 819.03	\$ 819.03	\$
GRAND TOTAL				\$ 2,543.71	\$ 2,543.71	\$

SCHEDULE 2(D) - DISBURSEMENTS
Other

PAYMENT DATE	CHECK NO.	PAYEE NAME AND ADDRESS	PURPOSE	FULL AMOUNT	PRO-RATA AMOUNT THIS REPORTING ENTITY	PRO-RATA AMOUNT OTHERS
				\$	\$	\$
				TOTAL, THIS PAGE	\$	\$
				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>				
				1. \$
				2. \$
				3. \$ 

SCHEDULE E
Outstanding Obligations

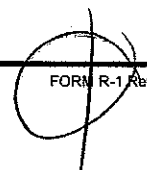
Date(s)	Creditor's Name	Address	Description	Amount
				\$
TOTAL OUTSTANDING OBLIGATIONS				\$ 0

SCHEDULE F
Refunded Disbursements

Date(s)	Check #	Full Name	Address	Description	Amount
					\$
SCHEDULE F TOTAL					\$ 0

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

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.)

\$ 5412.77

Funds Transferred from Prior Campaign

\$ —

Deposits (Include interest)

\$ 1075.00

Disbursements (Include bank charges)

\$ 3543.71

Closing Balance, this Report

\$ 2944.06

REARBY BANK PUTTING BELMAN FIRST
 NAME OF BANK OR DEPOSITORY NAME OF ACCOUNT
601 MAIN ST, BELMAN, NJ 07719
 ADDRESS OF BANK OR DEPOSITORY
BRIAN MAGOVERN 732-273-0097
 NAME OF TREASURER *TELEPHONE NUMBER (DAY)
207 S LAKE DRIVE, BELMAN, NJ 07719
 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>10/23/18</u> DATE	<u>BRIAN MAGOVERN</u> PRINT FULL NAME (CANDIDATE)	<u>Brian Magovern</u> SIGNATURE (CANDIDATE)
<u>10/23/18</u> DATE	<u>JENNIFER NICOLAY</u> PRINT FULL NAME (CANDIDATE)	<u>Jennifer Nicolay</u> SIGNATURE (CANDIDATE)
<u>10/23/18</u> DATE	<u>MARK LEWIS</u> PRINT FULL NAME (CANDIDATE)	<u>Mark Lewis</u> SIGNATURE (CANDIDATE)
<u>10/23/18</u> DATE	<u>BRIAN MAGOVERN</u> PRINT FULL NAME (TREASURER)	<u>Brian Magovern</u> SIGNATURE (TREASURER)

Treasurers for Governorial 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)