



JOINT CANDIDATES COMMITTEE - SWORN STATEMENT

FORM A-2

ELEC Received
Jun 30, 2018
10:47 AM

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)
Website: www.elec.nj.gov

Amendment

Joint Candidates Committee Name
PUTTING BELMAR FIRST-MAGOVERN, NICOLAY, LEVIS

Candidate Name
BRIAN MAGOVERN
Candidate Name
JENNIFER NICOLAY

Office Sought
MAYOR
Office Sought
COUNCIL OR MUNICIPAL OFFICE

Candidate Name
MARK LEVIS
Candidate Name

Office Sought
COUNCIL OR MUNICIPAL OFFICE
Office Sought

Candidate Name
Candidate Name

Office Sought
Office Sought

Street Address
207 SOUTH LAKE DRIVE

City
State
Zip Code
*(Area Code) Day Telephone
*(Area Code) Evening Telephone
BELMAR
NJ
07719
732-773-0097
732-773-0097

Committee Email (Optional)
Committee Website (Optional)
JANETGROSSHANDLER@GMAIL.COM

Election Type:
(Select One)
Primary
May Municipal
Fire District
General
Run-Off
Special
Election Date
11/06/2018

County
Legal Name of Election District or Municipality
Political Party
MONMOUTH COUNTY
BELMAR BOROUGH
DEMOCRAT

I, the undersigned, do hereby certify as follows:

- 1. The total amount expended or to be expended on behalf of candidates by this committee shall be zero, or shall not, in the aggregate, exceed \$9,700 for two candidates or \$14,000 for three or more candidates, for this election.
2. I am aware that in the event the total amount expended or to be expended on behalf of candidates by this committee, in the aggregate, exceeds \$9,700 for two candidates or \$14,000 for three or more candidates, I am required to file a "Report of Contributions and Expenditures," Form R-1, on each subsequent reporting date.
3. I am aware that if contributions from one source aggregate more than \$300, or if I receive currency (cash) contributions in any amount, I am required to report the contributions to the Commission on the "Supplemental Contributor Information," Form C-1, including the identity of the source and the aggregate total of contributions, and if the contributor is an individual, his/her occupation and the name and address of his/her employer.
4. I am aware that if the committee receives a contribution in excess of \$1,600 in the aggregate from one source starting with the 13th day before the election up to, and including, the day of the election, I am required to notify the Commission in writing on the "Supplemental Contributor Information," Form C-1, within 48 hours of receipt of the contribution and to identify the source and the aggregate amount received therefrom during the period, and, if the contributor is an individual, his/her occupation and the name and address of his/her employer.

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.



JOINT CANDIDATES COMMITTEE - CERTIFICATE OF ORGANIZATION AND DESIGNATION OF CAMPAIGN TREASURER AND DEPOSITORY

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)
 Website: www.elec.nj.gov

FORM D-2

ELEC Received
 Jun 30, 2018
 11:04 AM

Amendment

Joint Candidates Committee Name
 PUTTING BELMAR FIRST- MAGOVERN, NICOLAY, LEVIS

Candidate Name BRIAN MAGOVERN	Candidate Name JENNIFER NICOLAY
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Office Sought MAYOR	Office Sought COUNCIL OR MUNICIPAL OFFICE
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Candidate Name MARK LEVIS	Candidate Name
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Office Sought COUNCIL OR MUNICIPAL OFFICE	Office Sought
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Candidate Name	Candidate Name
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Office Sought	Office Sought
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Street Address
 207 SOUTH LAKE DRIVE

City BELMAR	State NJ	Zip Code 07719	*(Area Code) Day Telephone 732-773-0097	*(Area Code) Evening Telephone 732-773-0097
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Committee Email (Optional) JANETGROSSHANDLER@GMAIL.COM	Committee Website (Optional)
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Election Type: (Select One)	<input type="radio"/> Primary	<input type="radio"/> May Municipal	<input type="radio"/> Fire District	Election Date 11/06/2018
	<input checked="" type="radio"/> General	<input type="radio"/> Run-Off	<input type="radio"/> Special	

County MONMOUTH COUNTY	Legal Name of Election District or Municipality BELMAR BOROUGH	Political Party DEMOCRAT
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CHAIRPERSON

Name

Mailing Address

City	State	Zip Code	*(Area Code) Day Telephone	*(Area Code) Evening Telephone
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TREASURER

Name
 BRIAN MAGOVERN

Mailing Address
 207 SOUTH LAKE DRIVE

City BELMAR	State NJ	Zip Code 07719	*(Area Code) Day Telephone 732-773-0097	*(Area Code) Evening Telephone 732-773-0097
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Resident Address
 207 SOUTH LAKE DRIVE

City BELMAR	State NJ	Zip Code 07719
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*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.

DEPOSITORY INFORMATIONName of Bank or Depository
KEARNY BANKMailing Address
611 MAIN STREET

City BELMAR	State NJ	Zip Code 07719	(Area Code) Day Telephone 732-280-5400
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Account Name
PUTTING BELMAR FIRSTAccount Number
****2433**LIST THE NAME(S), MAILING ADDRESS(ES) AND TELEPHONE NUMBER(S) OF ANY PERSON(S) AUTHORIZED TO SIGN CHECKS OR OTHERWISE MAKE TRANSACTIONS**Name
BRIAN MAGOVERNMailing Address
207 SOUTH LAKE DRIVE

City BELMAR	State NJ	Zip Code 07719	*(Area Code) Day Telephone 732-773-0097	*(Area Code) Evening Telephone 732-773-0097
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Name
JANET GROSSHANDLERMailing Address
PO BOX 787

City BELMAR	State NJ	Zip Code 07719	*(Area Code) Day Telephone 732-773-0097	*(Area Code) Evening Telephone 732-773-0097
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Name

Mailing Address

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

Registration Number	*****	PIN	*****	Candidate	BRIAN P MAGOVERN	Date	06/30/2018
Registration Number	*****	PIN	*****	Candidate	JENNIFER A NICOLAY	Date	06/30/2018
Registration Number	*****	PIN	*****	Candidate	MARK A LEVIS	Date	06/30/2018
Registration Number		PIN		Candidate		Date	
Registration Number		PIN		Candidate		Date	
Registration Number		PIN		Candidate		Date	

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.

Registration Number		PIN		Chairperson		Date	
Registration Number	*****	PIN	*****	Treasurer	BRIAN P MAGOVERN	Date	06/30/2018

Treasurers for Gubernatorial and Legislative candidates are required to receive training with the NJ ELEC. If you have completed the training enter your Treasurer Training ID# _____

*Leave this field blank if your telephone number is unlisted. Pursuant to N.J.S.A. 47:1A-1.1, an unlisted telephone number is not a public record and must not be provided on this form.



SUPPLEMENTAL CONTRIBUTOR INFORMATION

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)
Website: www.elec.nj.gov

FORM C-1

ELEC Received
Jul 05, 2018
11:00 AM

Amendment

CONTRIBUTIONS REPORT TYPE (Select One)

- Committee spending under the R-1 reporting threshold (A-1 or A-2 filers etc.) who received a contribution in excess of \$ 300 in the aggregate from one source in the election, or any currency (cash) contributions.
Committee receiving a contribution in excess of \$ 1,600 in the aggregate from one source starting with the 13th day before the election up to, and including the day of the election (48-Hour Notice).

SECTION I. CANDIDATE, JOINT CANDIDATES, OR POLITICAL COMMITTEE INFORMATION

Candidate(s) Name: BRIAN MAGOVERN, JENNIFER NICOLAY, MARK LEVIS
Committee Name: PUTTING BELMAR FIRST- MAGOVERN, NICOLAY, LEVIS
Street Address: 207 S LAKE DRIVE
Office Sought: MAYOR & COUNCIL
City: BELMAR, State: NJ, Zip Code: 07719, Telephone: (732) 7730097
Election Type: General, Election Date: 11/06/2018
County: MONMOUTH COUNTY, Legal Name: BELMAR BOROUGH, Political Party: DEMOCRAT

SECTION II. CONTRIBUTION INFORMATION (Receipt Types: A = Currency or Check, B = In-Kind, C = Loan)

Table with 4 columns: Date Received, Contributor Name, Address, Occupation, Receipt Type, Check if Currency, Description, Amount. Includes entry for ALEXANDRA MARTIN with \$50.00 contribution.

Grand Total: \$50.00

Registration Number ***** PIN *****
Candidate or Treasurer BRIAN P MAGOVERN Date 07/05/2018